# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

DLN: 93493237008061 OMB No. 1545-0047

Open to Public

Form <b>99(</b>
D

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

► Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.

Inspection

		nue Service	I .		15.51					
			alendar year, or tax year begin  C Name of organization	ning 01-01-2020 , and ending	12-31-	-2020	D Employ	or ident	ification number	_
		pplicable: change	DISABLED AMERICAN VETERANS						mcation number	
	me cha	-	% BARRY A JESINOSKI				31-026	3158		
	tial ret	turn n/terminated	Doing business as							
		n/terminated d return	Number and street (or P.O. box if ma	ail is not delivered to street address) Ro	oom/suite	<u> </u>	E Telephor	ne numbe	∍r	
□ Ар	plicatio	on pending	860 DOLWICK DRIVE				(859) 4	41-730	0	
			City or town, state or province, coun ERLANGER, KY 41018	try, and ZIP or foreign postal code						
			·				<b>G</b> Gross re	ceipts \$	335,662,952	
			<b>F</b> Name and address of principa BARRY A JESINOSKI	l officer:		H(a) Is this		turn for		
			860 DOLWICK DRIVE ERLANGER, KY 41018			subor <b>H(b)</b> Are al	dinates? I subordinat	tes	☐Yes ☑No	
I Ta:	x-exen	npt status:				includ	ed?		☐ Yes ☐No	)
1 \A/	a bait		☐ 501(c)(3) ☐ 501(c)(4) ☐ /W.DAV.ORG	(insert no.) 4947(a)(1) or		H(c) Group	•	•	e instructions)	
, vv	ebsiti	.e: P ww	W.DAV.ORG				CXCIIIPCIOII	Hambe	1 - 0337	
<b>K</b> Forr	n of or	rganization:	Corporation Trust Assoc	ciation 🗹 Other 🕨	ı	L Year of forma	ntion: 1932	M State	e of legal domicile:	
		_						<u> </u>		
Pa	art I	Sumi	<b>-</b>							
a.			scribe the organization's mission or 20, EMPOWERING VETERANS TO L	r most significant activities: EAD HIGH-QUALITY LIVES WITH R	ESPECT	AND DIGNI	ΓY.			
2	-									
Ē	-									_
Governance	2	Check thi	s box $\blacktriangleright$ $\square$ if the organization dis	continued its operations or dispose	ed of mo	re than 25%	of its net a	issets.		
	l		of voting members of the governin					3	_	7
<b>~</b> ∽	l		· -	the governing body (Part VI, line 1	-			4		6
Activities &	l		• •	endar year 2020 (Part V, line 2a)			•	5 6		554
act T	l		nber of volunteers (estimate if nec elated business revenue from Part	•	7a		027			
	1			1 Form 990-T, line 39			_	7b	-	0
	-	Tree armen	adda babiii cob taxabic iii comic ii on	, , , , , , , , , , , , , , , , , , ,		Pri	or Year	7	Current Year	<u> </u>
٥.	8	Contribut	tions and grants (Part VIII, line 1h)				129,395,	105	130,179,6	555
Ravenue	9	Program :	service revenue (Part VIII, line 2g)		30,	525	40,2			
3yç	10	Investme	ent income (Part VIII, column (A), li		14,582,	23,049,	740			
_	11	Other rev	enue (Part VIII, column (A), lines 5	1,380,	346 662,30					
	12	Total reve	enue—add lines 8 through 11 (mu	st equal Part VIII, column (A), line	12)		145,388,	158	153,931,9	<b>95€</b>
	1		nd similar amounts paid (Part IX, co				6,140,		7,559,9	
	l		,	llumn (A), line 4)				0	126,7	
Ses	l			nefits (Part IX, column (A), lines 5-	•		54,575,		53,964,6	
Expenses	Ι.			nn (A), line 11e)	•		1,379,	J43	1,378,2	245
Ä	1		raising expenses (Part IX, column (D), I penses (Part IX, column (A), lines 1		_		81,913,	484	69,549,	517
	1		enses. Add lines 13–17 (must equ	•			144,008,		132,578,	
	1	-	less expenses. Subtract line 18 fro				1,379,		21,353,3	
& <b>&amp;</b>			·			Beginning	of Current Y		End of Year	
anc anc										
Ass I Ba	1		ets (Part X, line 16)		ı		501,912,		549,946,	
Net Assets or Fund Balances	1		ilities (Part X, line 26) s or fund balances. Subtract line 2		•		137,037,3 364,875,3		134,696,0 415,250,!	
	rt II		ature Block	.T Hom line 20			304,673,.	204	415,250,	3 <del>4</del> /
				ned this return, including accompa	anying s	chedules and	statement	s, and to	o the best of my	_
	ledge nowle		f, it is true, correct, and complete.	Declaration of preparer (other tha	an office	r) is based o	n all inform	ation of	which preparer ha	ıs
,		<u></u>								
		Signatu	* ure of officer			202 Date	0-06-15 e			-
Sign Here		,								
	-		A JESINOSKI EXECUTIVE DIRECTOR r print name and title							-
		l Pi	rint/Type preparer's name	Preparer's signature	Dat	te		PTIN		-
Paid	t						ck 🔲 if -employed	P0096188	84	
	pare	er F	irm's name <b>&gt;</b> BKD LLP	-			n's EIN ▶			
	On	<u> </u>	irm's address ► 312 WALNUT STREET S	UITE 3000		Pho	ne no. (513)	621-830	0	
			CINCINNATI, OH 4520				. ,			
May +	ho IP	S discuss	this return with the preparer show						Ves No	_

Form	990 (2020)					Page <b>2</b>								
Pa	statement	of Program Servi	ce Accomplis	hments										
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III		🗹								
1		organization's mission:		,										
			EMPOWERING VE	TERANS TO LEAD HIGH-	QUALITY LIVES WITH RESPECT	Γ AND DIGNITY. SEE								
SCH	EDULE O FOR FURTHER	R DETAILS.												
2	Did the organization	undertake any signific	ant program ser	vices during the year whi	ch were not listed on									
	the prior Form 990 o	r 990-EZ?				☐ Yes 🗹 No								
	If "Yes," describe the	ese new services on Sc	hedule O.											
3	Did the organization	Did the organization cease conducting, or make significant changes in how it conducts, any program												
	services?													
	If "Yes," describe the	If "Yes," describe these changes on Schedule O.												
4	Section 501(c)(3) an		ons are required	to report the amount of	rgest program services, as me grants and allocations to other									
	(Code:	) (Expenses \$	37,976,172	including grants of \$	75,123 ) (Revenue \$	)								
	See Additional Data													
4b	(Code:	) (Expenses \$	2,140,402	including grants of \$	402,949 ) (Revenue \$	)								
	See Additional Data													
4c	(Code:	) (Expenses \$	1,121,220	including grants of \$	) (Revenue \$	)								
	See Additional Data													
4d	Other program servi	ces (Describe in Sched	ule O.)											
	(Expenses \$	48,520,922 inc	luding grants of	\$ 7,081,82	9 ) (Revenue \$	40,259 )								
4e	Total program serv	vice expenses ▶	89,758,7	16										

Form	990 (2020)			Page <b>3</b>
Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part   2	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 2	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII $\ref{Mathematical Schedule D}$	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and $IV$	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		No

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . .

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Nο

Yes

20a

20b

21

d the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, blumn (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<b>Yes</b> Yes	No
dumn (A), line 2? If "Yes," complete Schedule I, Parts I and III			No
dumn (A), line 2? If "Yes," complete Schedule I, Parts I and III		Yes	<u> </u>
In difference of ficers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete chedule J	23		-
e last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and		Yes	
emplete Schedule K. If "No," go to line 25a	24a		No
d the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
d the organization maintain an escrow account other than a refunding escrow at any time during the year defease any tax-exempt bonds?	24c		
d the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	25a		No
at the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25b		No
ficer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family	26		No
nployee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete</i>	27		No
	282		N
family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV	20a		"
	28b		N
	28c		N
d the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏 📗	29	Yes	
	30		N
d the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N
	32		N
d the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 01.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		N
	34		N
d the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		N
	35b		
	36		
	37		N
	38	Yes	
Check if Schedule O contains a response or note to any line in this Part V	<del></del>	Voc	<u> </u>
oter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		res	N
	action 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit ansaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and at the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete schedule L, Part I in the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete schedule L, Part II in the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former ficer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family ember of any of these persons? If "Yes," complete Schedule L, Part II in the organization provide a grant or other assistance to any current or former officer, director, trustee, key mployee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete schedule L, Part III is as the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV structions for applicable filing thresholds, conditions, and exceptions): current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," implete Schedule L, Part IV is family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV is different organization receive more than 225,000 in non-cash contributions? If "Yes," complete Schedule M is the organization exceive more than 225,000 in non-cash contributions? If "Yes," complete Schedule M is the organization injudiate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M is the organization will be	duction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit ansaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I at the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and at the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete chedule L, Part I at the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former foicer, director, trustee, key employees, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II at the organization provide a grant or other assistance to any current or former officer, director, trustee, key may be a propriete Schedule L, Part II as the organization approach or 10 abusiness transaction with one of the following parties (see Schedule L, Part IV as the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV structions for applicable filling thresholds, conditions, and exceptions): current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV as the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  28b as 5% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule M.  28c dit the organization individual described in line 28a? If "Yes," complete Schedule M.  28d dit he organization individuals, or transfer more than 25% of its net assets? If "Yes," complete Schedule M.  38d dit have organization engalization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II dit the organization with a controlled entity within the meaning of sect	action 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit ansaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 255 a the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 255 a the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and at the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II at the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former fifter, director, trustee, key employee, creator or founder, substantial contributor, or substantial contributor, or substantial contributor, or supplyee thereof), a grant selection committee member, or to 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV structions for applicable filing thresholds, conditions, and exceptions):  current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," and the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV structions for applicable filing thresholds, conditions, and exceptions):  current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," and the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV and the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II and the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II and the organization will be organization or exceeded to the proper substantial or transfer more than \$25,000 in non-cash con

**1**c

Pai	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3				
	Enter the number of employees reported on Form W-3, Transmittal of Wage and							
	Tax Statements, filed for the calendar year ending with or within the year covered by this return							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes					
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:	4a		No				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6а		No 				
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b						
	Organizations that may receive deductible contributions under section 170(c).							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
e	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
c	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No				
16	If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If "Yes," complete Form 4720, Schedule O.	16		No				

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	o" respo	onse to I	lines <b>V</b>
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  1a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent  1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Coae	Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100	103	
	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	10b	Yes	
	form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AR , CA , GA , HI , KS , KY , MD , MN , MS NC , OR , PA , RI , SC , TN , TX , UT , VA	NH , WV	MN , UN	, NY ,
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ▶BARRY A JESINOSKI 860 DOLWICK DRIVE ERLANGER, KY 41018 (859) 441-7300			

П

Part VII

# Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above

See instructions for the order in which to list the	•									
Check this box if neither the organization no	r any related o	ganizal	ion c	omp	ens	ated a	ny c	urrent officer, dire	ctor, or trustee.	
<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)		ne bo	ox, i n of or/t	t ch unle fice rust	ss pers	son	(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) J MARC BURGESS NATL ADJUTANT/CEO/SEC.	60.0	х		×				321,307	0	282,089
(2) EDWARD R REESE EXEC. DIR. NATL LHQ	55.0				х			239,472	0	307,217
(3) BARRY A JESINOSKI EXEC. DIR. NATL HQ	55.0				х			254,343	0	252,202
(4) SUSAN LOTH SR. CHIEF DEV. OFFICER	40.0					х		195,174	0	235,398
(5) ANITA BLUM COMPTROLLER	50.0					х		196,783	0	216,755
(6) BRIAN COWART CHIEF DEV. OFFICER	50.0					х		236,526	0	122,354
(7) JAMES MARSZALEK NATIONAL SERVICE DIRECTOR	50.0					×		190,127	0	116,636
(8) CHRISTOPHER CLAY GENERAL COUNSEL	40.0					х		233,376	0	61,661
(9) ROBERT D COX TREASURER	5.0 0.0	Х		×				0	0	0
(10) ANDREW MARSHALL VICE CHAIRMAN OF THE BOARD	5.0	X		X				0	0	0
(11) JOHN F DONOVAN DIRECTOR	0.0	х						0	0	0
(12) DENNIS R NIXON CHAIRMAN OF THE BOARD	5.0	х		х				0	0	0
(13) TERRY W SANDERS DIRECTOR	5.0	х						0	0	0
(14) KEVIN J WALKOWSKI DIRECTOR	5.0	х						0	0	0

CREATIVE DIRECT RESPONSE,

321 SOUTH MAIN STREET 200 PROVIDENCE, RI 02903

CHISHOLM CHISHOLM KILPATRICK LTD,

compensation from the organization ▶ 39

16900 SCIENCE DRIVE BOWIE, MD 20715

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F)

Page 8

	(A) Name and title	Average hours per week (list any hours for related	than c	one b	οχ, ι an of	ot cho unles fficer	neck mo ess pers r and a tee)	son	Reportable compensation from the organization (W-2/1099-	Reportable compensation from related organizations (W-2/1099-	5	compensation from the			
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)		related organizations			
			<u> </u>	—	igspace	igspace	<del> </del>								
				$\vdash$	+	$\vdash$	<del> </del>								
				_	$\vdash$	$\vdash$	<del>                                     </del>								
				lacksquare	lacksquare	$oxed{\Box}$									
				_	$\vdash$	$\vdash$	—	-							
			<del> </del>	+	-	$\vdash$	┼				+				
c T	Sub-Total	Part VII, Section			<del></del>		<b> </b>		1,867,108		0		1,594,312		
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos			bov	e) who	rece		\$100,000					
	<u> </u>					—						Yes	No		
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i>			:ee, k	ey e •	mpl	oyee,	or hi	ghest compensat	ed employee on	3		No		
4	For any individual listed on line 1a, is organization and related organization individual										4	Yes			
5	Did any person listed on line 1a rece services rendered to the organization										5	163	No.		
Se	ection B. Independent Contract				_	_					5		No		
1	Complete this table for your five high from the organization. Report compe	hest compensate									mpen:	sation			
	Name	(A) and business addre	ess							(B) escription of services		(C Comper			
705 M	BY MARKETING COMMUNICATIONS, IELVIN AVENUE SUITE 200 POLIS, MD 21401								PROFESS	IONAL		2	,240,074		
MINDS 12355	SET DIRECT LLC, 5 SUNRISE VALLEY DRIVE SUITE 2 DN, VA 20191								PROFESS	IONAL			893,332		
CHAMI 720 E	PLIN ARCHITECTURE, AST PETE ROSE WAY 140 NNATI, OH 45202							•	PROFESS	IONAL			781,896		
	TIVE DIRECT RECOONES								DROFFCC	TONAL			724 577		

(C)

(D)

PROFESSIONAL

PROFESSIONAL

(E)

(B)

734,577

444,957

Form 9	90	(2020)								Page <b>9</b>
Part	VIII									
		Check if Sched	dule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ons, Gifts, Grants Similar Amounts	b c	Federated campaig Membership dues Fundraising events Related organization		. 1	a b c d	8,989,607		revenue		312 311
ributic Other	f	All other contributions and similar amounts above Noncash contributions lines 1a - 1f:\$	s, gift not ir	ts, grants, ncluded <b>1</b> uded in	e   .f   g	121,190,048 528,522				
Cont	h	Total. Add lines 1a	a-1f		<u> </u>	•	130,179,655			
						Business Code	. ,			
<u>o</u>	2a	Registration Income				900099	40,259	40,259		
He venu	b	•								
vice A	c	2								
Program Service Revenue	d	I								
	e	•								
-Σ	f	All other program	serv	ice revenue.						
		Total. Add lines 2				40,259	•		1	
		Investment income similar amounts) .			nds, ii •	nterest, and other	9,331,72	2		9,331,722
	4	Income from invest	men	t of tax-exem	pt bo	ond proceeds		0		
	5	Royalties	_		•	•	368,68	2		368,682
				(i) Real		(ii) Personal	-			
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	c	Rental income					-			
	٫	or (loss) Net rental income	6c	(loss)	0		<u> </u> 	0		
	`	- Net rental income		(i) Securit		(ii) Other				
	7a	a Gross amount from sales of assets other than inventory								
	ь	Less: cost or other basis and sales expenses	7b	181,72	29,976	1,020				
	l	Gain or (loss)	7c		52,592	· ·	4			
9	l	<ul><li>d Net gain or (loss)</li><li>a Gross income from fu (not including \$</li></ul>	ındra	ising events of	 	• • • •	13,718,01	8		13,718,018
Other Revenue		contributions reported See Part IV, line 18 Less: direct expen	•		8a 8b	0	-			
her	ı	Net income or (los				ents		0		
	9a	Gross income from See <b>Part</b> IV, line 19	gami •	ing activities.	9a	0				
	ı	Less: direct expen			9b	0		0		
	`	Net income or (los	S) II	om gaming a		es <b>&gt;</b>				
		aGross sales of invertering and alloware Less: cost of good	nces	5	10a 10b	0				
		Net income or (los			nvent			0		
		Miscellaneo				Business Code	200.55	0		202.655
		La OTHER INCOME				900095	293,62	0		293,620
	•									
		d All other revenue  Total. Add lines 1				•				
		2 Total revenue. S					293,62	0		
		- rotal revenue. S	ee If	iou accions .	•	· · · •	153,931,95	6 40,25	9	23,712,042

Forn	n 990 (2020)				Page <b>10</b>
Pa	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must co		_		ımn (A).
	Check if Schedule O contains a response or note to an	y line in this Part IX			<u> L</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,644,470	4,644,470		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	2,915,431	2,915,431		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members	126,297	126,297		
5	Compensation of current officers, directors, trustees, and key employees	1,722,290	1,266,878	455,412	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	38,581,772	32,880,435	3,697,880	2,003,457
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	3,797,004	2,807,921	460,887	528,196
9	Other employee benefits	7,056,293	6,048,775	592,065	415,453
10	Payroll taxes	2,807,257	2,421,726	254,068	131,463
11	Fees for services (non-employees):				
	Management	0			
	Legal	322,425	50,413	252,978	19,034
	Accounting	228,404	30,120	228,404	
	<del>-</del>	0		220,404	
	Lobbying				1,378,245
	Professional fundraising services. See Part IV, line 17	1,378,245		200 520	1,376,243
	Investment management fees	296,530	2.075.656	296,530	010.015
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,709,456	2,975,656	923,754	810,046
	Advertising and promotion	8,609,299	5,764,482	70,128	2,774,689
13	Office expenses	47,627,332	22,614,929	1,079,656	23,932,747
14	Information technology	523,109	347,355	156,121	19,633
15	Royalties	1,389,596	621,362		768,234
16	Occupancy	388,196	257,150	131,046	
17	Travel	40,089	9,896	9,978	20,215
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings	469,000	469,000		
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,796,541	1,526,173	235,789	34,579
23	Insurance	355,946	201,962	151,825	2,159
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a Training	40,643	21,608	13,868	5,167
	<b>b</b> Relocation	639,134	621,662	7,084	10,388
•	c Project Costs	365,000	365,000		
•	d Other Expenses	1,748,817	800,135	616,611	332,071
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	132,578,576	89,758,716	9,634,084	33,185,776
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	47,383,333	23,689,186	0	23,694,147

Check here ► ✓ if following SOP 98-2 (ASC 958-720).

Form 990 (2020)

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

٥ 29

Assets 30 0

0 6 0

103.112

7,708,082

9,560,712

456,494,990

7

10c

11

12

14

15

16

17

18

19

23

25

26

27

28

29

30

31

32

33

0

0 13

0

0 20

0 21

0 22

0

0 24

101,347,499

137.037.288

351,869,166

13,006,038

364,875,204

501,912,492

368,750

501,912,492

31,886,361

3,803,428

Page **11** 

33.251

9,521,286

14,212,696

502,312,991

1,170,145

549,946,548

34,683,711

319.214

0

0

0

0

99,693,076

134.696.001

399,236,337

16,014,210

415,250,547

549,946,548

Form 990 (2020)

0

0

Check if Schedule	O contains a	a response	or note	to any	line in	this Part I	Χ.

	Beginning of year	End of year
1 Cash-non-interest-bearing	0 1	
2 Savings and temporary cash investments	21,328,810 <b>2</b>	15.

2	Savings and temporary cash investments	21,328,810	2	15,802,402
3	Pledges and grants receivable, net	0	3	0
4	Accounts receivable, net	6,348,036	4	6,893,777
5	Loans and other payables to any current or former officer, director, trustee,			

51,175,618

36,962,922

	- · · · · · · · · · · · · · · · · · · ·	
ŀ	Accounts receivable, net	
5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	
j	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), and persons described in section $4958(c)(3)(B)$	

10a

10b

Notes and loans receivable, net . . . .

Prepaid expenses and deferred charges .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Investments—other securities. See Part IV, line 11 .

**Total assets.** Add lines 1 through 15 (must equal line 33)

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Investments—program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

Other assets. See Part IV, line 11 .

Accounts payable and accrued expenses

or family member of any of these persons

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Inventories for sale or use .

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

☐ Both consolidated and separate basis

Yes

No

Form 990 (2020)

2c

3a

3h

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Consolidated basis

consolidated basis, or both:

Separate basis

Audit Act and OMB Circular A-133?

#### **Additional Data**

Software ID:

Software Version:

**EIN:** 31-0263158

Name: DISABLED AMERICAN VETERANS

Form 990 (2020)

Form 990, Part III, Line 4a:

SERVICE PROGRAM: DAV'S PROFESSIONAL BENEFITS ADVOCATES OFFER SERVICES AT NO COST OBLIGATION TO VETERANS. THEIR FAMILIES AND SURVIVORS. VETERANS DO NOT HAVE TO BE DAV MEMBER TO TAKE ADVANTAGE OF THE FREE ASSISTANCE. -NSOS FILED NEARLY 140,000 NEW CLAIMS AND OBTAINED MORE THAN \$23 BILLION IN NEW AND RETROACTIVE BENEFITS FOR VETERANS AND THEIR FAMILIES BEFORE THE VA. -TSOS CONDUCTED OVER 300 PRESENTATIONS TO 10,000

SEPARATING SERVICE MEMBERS. THEY COUNSELED OVER 21,000 SERVICE MEMBERS AND PRESENTED ALMOST 17,000 APPLICATIONS FOR EARNED VA BENEFITS. (SEE SCHEDULE 0)

# VOLUNTARY SERVICES PROGRAM: BY PROVIDING VETERANS WITH TRANSPORTATION TO MEDICAL APPOINTMENTS, COORDINATING IN-HOSPITAL VOLUNTEERING OPPORTUNITIES AND ENCOURAGING AND SUPPORTING EFFORTS AND EVENTS TO PROVIDE THE BEST POSSIBLE CARE, MORALE AND ASSISTANCE TO OUR NATION'S HEROES, DAV ENHANCES THE QUALITY OF LIFE OF VETERANS. THEIR FAMILIES AND SURVIVORS. -IN 2020, TRANSPORTATION VOLUNTEERS TRAVELED 9.6 MILLION

MILES, PROVIDING MORE THAN 243,000 RIDES TO VETERANS AND DONATING OVER 677,000 HOURS OF THEIR TIME. (SEE SCHEDULE O)

Form 990, Part III, Line 4b:

Form 990, Part III, Line 4c: EMPLOYMENT PROGRAM: DAV IS COMMITTED TO ENSURING TRANSITIONING MILITARY MEMBERS AND THEIR FAMILIES SECURE THE TOOLS, RESOURCES AND OPPORTUNITIES THEY NEED TO ADVANCE THEIR EMPLOYMENT GOALS. SINCE THE PROGRAM'S INCEPTION IN 2014 THROUGH DECEMBER 2020, DAV SPONSORED 699 IN-PERSON AND VIRTUAL CAREER FAIRS THAT NEARLY 240,000 ACTIVE-DUTY, GUARD AND RESERVE PERSONNEL, VETERANS AND THEIR SPOUSES ATTENDED, RESULTING

IN MORE THAN 151,000 JOB OFFERS. -DAV CONNECTS VETERANS WITH EMPLOYMENT RESOURCES AND OPPORTUNITIES THROUGH ITS WEBSITE WWW.JOBS.DAV.ORG

(SEE SCHEDULE O).

**SCHEDULE D** 

DLN: 93493237008061

Cat. No. 52283D Schedule D (Form 990) 2020

OMB No. 1545-0047

# **Supplemental Financial Statements**

Complete if the organization answered "Yes," on Form 990,
 Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 ► Attach to Form 990.

Open to Public

Department of the Treasury

(Form 990)

Na	nme of the organization	1990 TOT MISTIGLIONS and the latest mior		identification	number
DIS	SABLED AMERICAN VETERANS		31-026315	58	
Pa	Organizations Maintaining Donor Advis Complete if the organization answered "Ye				
		(a) Donor advised funds	<b>(b)</b> Fi	unds and other	accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex				Yes 🗌 No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor, or for any other purpose of		permissible _	] Yes □ No
Pa	rt II Conservation Easements.	-II F 000 PII II 7			
_	Complete if the organization answered "Ye	<u>, , , , , , , , , , , , , , , , , , , </u>			
1	Purpose(s) of conservation easements held by the organ	_ ` _ ` _ ` _ ` ` _ ` ` ` ` ` ` ` ` ` `			
	☐ Preservation of land for public use (e.g., recreation	·	•	•	area
	Protection of natural habitat	☐ Preservation of a c	ertified histo	ric structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the for			
	easement on the last day of the tax year.	1	. —	ld at the End	of the Year
а	Total number of conservation easements		2a		
b	,		2b		
с	Number of conservation easements on a certified historic	` '	2c		
d	Number of conservation easements included in (c) acqui structure listed in the National Register	red after 7/25/06, and not on a historic	2d		
3	Number of conservation easements modified, transferre tax year ▶	d, released, extinguished, or terminated by	the organizat	tion during the	
4	Number of states where property subject to conservatio	n easement is located <b>&gt;</b>			
5	Does the organization have a written policy regarding thand enforcement of the conservation easements it holds		of violations,	☐ Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing co	nservation e	asements durii	ng the year
7	Amount of expenses incurred in monitoring, inspecting,  ▶ \$	handling of violations, and enforcing conserv	vation easem	nents during the	e year
8	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(ii)$ ?		70(h)(4)(B)(i	i)	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the	footnote to the organization's financial state		nt, and	
	the organization's accounting for conservation easemen		an Circuita	Accet-	
Pal	rt III Organizations Maintaining Collections Complete if the organization answered "Ye		er Similar	Assets.	
1a	If the organization elected, as permitted under FASB AS historical treasures, or other similar assets held for publ Part XIII, the text of the footnote to its financial statements.	ic exhibition, education, or research in furth			
b	If the organization elected, as permitted under FASB AS historical treasures, or other similar assets held for publ following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1		▶\$	·	
(	ii)Assets included in Form 990, Part X		<b>&gt;</b> \$		
2	If the organization received or held works of art, historic following amounts required to be reported under FASB A	cal treasures, or other similar assets for final			
а	Revenue included on Form 990, Part VIII, line 1	3	►\$	;	
h	Assets included in Form 990 Part X				

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

 $\boldsymbol{c} \ \ \text{Leasehold improvements}$ 

 $\boldsymbol{d}$  Equipment . . . .

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

e Other . .

	edule D (Form 990) 2020							Page 2
Par		Maintaining Collectio						
3	Using the organization's a items (check all that apply		other records, ch		he following	that are a sigr	nificant use of i	its collection
а	Public exhibition			d 🗌	Loan or exc	hange program	s	
b	☐ Scholarly research			e 🗌	Other			
С	Preservation for futu	ure generations						
4	Provide a description of th Part XIII.	e organization's collections	and explain ho	w they furth	er the orgar	nization's exem	pt purpose in	
5	During the year, did the o assets to be sold to raise f							∕es □ No
Pa		stodial Arrangements organization answered '		990, Part	IV, line 9,	or reported a	n amount on	Form 990, Part
1a	Is the organization an age included on Form 990, Par	nt, trustee, custodian or o t X?	ther intermediar	y for contrib	utions or ot 	her assets not	· · · □ <b>\</b>	∕es □ No
b	If "Yes," explain the arran	gement in Part XIII and co	mplete the follo	wing table:			Amoun	t
c	, ·		•	_		1c		
d	Additions during the year					1d		
е	• ,	ear				1e		
f	• ,					1f		
2a	Did the organization include	de an amount on Form 990	, Part X, line 21	, for escrow	or custodial	account liabilit	y? 🗆 <b>ነ</b>	res 🗆 No
b	If "Yes," explain the arran						_	
	rt V Endowment Fu		THEFE II THE EXP		been provid	ed III i die XIII		
		organization answered '	'Yes" on Form	990, Part	IV, line 10			
	•			<b>(b)</b> Prior yea		years back (d)	Three years bac	k (e) Four years back
1a	Beginning of year balance		9,392,382	3,172	223	0	ı	0 0
b	Contributions		254,912	5,178		3,386,166		
С	Net investment earnings, ga	ains, and losses	1,411,173	1,041	443	-213,943		
d	Grants or scholarships .							
е	Other expenditures for facil and programs	ities	158,647					
f	Administrative expenses .							
g	End of year balance		10,899,820	9,392	382	3,172,223		0 0
2	Provide the estimated per- Board designated or quasi	- '	r end balance (li	ne 1g, colur	nn (a)) held	as:		
а	Permanent endowment	100.000 %						
b	41	100.000 /0						
С	Term endowment ►		1.1000/					
3a	The percentages on lines 2 Are there endowment fund organization by:			that are he	ld and admi	nistered for the	e	Yes No
	(i) Unrelated organization	S				•	Г	3a(i) No
b	(ii) Related organizations If "Yes" on 3a(ii), are the			 Schedule P			<u> </u>	3b No
4	Describe in Part XIII the in	-						36
	rt VI Land, Buildings	s, and Equipment.  organization answered '			IV line 11	a See Form (	990 Part V 1	line 10
	Description of property	(a) Cost or other basis (investment)		other basis (c	<del></del>	ccumulated depre	<del></del>	(d) Book value
1a	Land			2,68	9,553			2,689,553
	Buildings			· · ·	5,995	6,2	221,042	784,953
	<del>-</del>	i					1	

5,390,518

28,779,288

7,310,264

1,004,170

2,423,756

7,310,264

14,212,696

4,386,348

26,355,532

	(a) Description of cocurity or enterony			d of valuation:
	<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b) Book value		year market value
(1) Financial	derivatives	value		
(2) Closely-l (3)Other	neld equity interests			
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
Total. (Column Part VIII	(b) must equal Form 990, Part X, col. (B) line 12.)  Investments—Program Related.	<u> </u>		
	Complete if the organization answered 'Yes' on Form 990, I  (a) Description of investment	Part IV, line	11c. See Form 990, (b) Book value	Part X, line 13.  (c) Method of valuation:
	(a) sessipation of investment		(b) book value	Cost or end-of-year market value
(1)				. 3100
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
8)				
٠,				
(9)				
(9)	(h) must equal Form 000. Part V. cal (P) line 12.)			
(9) (10) Total. (Column	(b) must equal Form 990, Part X, col.(B) line 13.)  Other Assets.		<b>b</b>	
(9) (10) Fotal. (Column		art IV, line :	•	t X, line 15.
(10) Fotal. (Column Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
(10)  Fotal. (Column Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
(10) Fotal. (Column Part IX  (1)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
(10) Fotal. (Column Part IX (1) (2)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
9) 10) Total. (Column Part IX  1) 2) 3)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
(10)  Fotal. (Column Part IX  (1)  (2)  (3)  (4)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
(9) (10) Fotal. (Column Part IX (1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
(10)  Fotal. (Column Part IX  (1)  (2)  (3)  (4)  (5)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
(10)  Fotal. (Column Part IX  (1)  (2)  (3)  (4)  (5)  (6)  (7)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	•	
(9) (10) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, line :	•	
(9) (10) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column Part IX	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description		•	
(9) (10) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.		11d. See Form 990, Par	(b) Book value
(9) (10)  Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  (b) must equal Form 990, Part X, col.(B) line 15.)		11d. See Form 990, Par	(b) Book value
(9) (10) Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X  1. (1) Federal i	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes		11d. See Form 990, Par	(b) Book value    Page
(9) (10) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column Part X 1. (1) Federal in (2) Postretire	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes  ment Benefit Oblig		11d. See Form 990, Par	(b) Book value  990, Part X, line 25.  (b) Book value  0  53,980,066
(9) (10) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column Part X  1. (1) Federal in (2) Postretire (3) Other Lia (4) Reserve in (4) Reserve in (4) Reserve in (6)	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes  ment Benefit Oblig		11d. See Form 990, Par	(b) Book value    Page
(9) (10) (10) (10) (11) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (1) (2) (2) (2) (3) (4) (2) (3) (4) (4) (4) (4) (5) (6) (7) (8) (9) (10)	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes  ment Benefit Oblig  billities		11d. See Form 990, Par	(b) Book value  990, Part X, line 25.  (b) Book value  0  53,980,066  204,755
(9) (10)  Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal in (2) Postretire (3) Other Lia (4) Reserve in (4)	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes  ment Benefit Oblig  billities		11d. See Form 990, Par	(b) Book value  990, Part X, line 25.  (b) Book value  0  53,980,066  204,755
(9) (10) Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X  1. (1) Federal in (2) Postretire (3) Other Lia	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes  ment Benefit Oblig  billities		11d. See Form 990, Par	(b) Book value  990, Part X, line 25.  (b) Book value  0  53,980,066  204,755
(9) (10) Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X  1. (1) Federal in (2) Postretire (3) Other Lian (4) Reserve in (4) (5)	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes  ment Benefit Oblig  billities		11d. See Form 990, Par	(b) Book value  990, Part X, line 25.  (b) Book value  0  53,980,066  204,755
(9) (10) Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X  1. (1) Federal in (2) Postretire (3) Other Lia (4) Reserve in (4) (5) (6) (7)	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes  ment Benefit Oblig  billities		11d. See Form 990, Par	(b) Book value  990, Part X, line 25.  (b) Book value  0  53,980,066  204,755
(9) (10) Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X  1. (1) Federal in (2) Postretire (3) Other Lia (4) Reserve in (4) (5) (6)	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description  mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P  (a) Description of liability  ncome taxes  ment Benefit Oblig  billities		11d. See Form 990, Par	(b) Book value  990, Part X, line 25.  (b) Book value  0  53,980,066  204,755

2

3 4

b

C

Part XII

5

1 2

C

d

b

5

Part XIII

See Additional Data Table

3 4

Schedule D (Form 990) 2020

Page 4

126,837,177

95,563,021

132,282,046

296.530

132.578.576

Schedule D (Form 990) 2020

а	Net unrealized gains (losses) on investments	2a	31,274,156
b	Donated services and use of facilities	2b	24,747,973
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	70,815,048

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Subtract line **2e** from line **1** . . . . . . . . . . . . . . . . . .

Add lines **4a** and **4b** . . . . . . . . . . . . . . .

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

Total expenses and losses per audited financial statements . . . . . .

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Add lines **4a** and **4b** . . . . . . . . . . . . .

Supplemental Information

Add lines 2a through 2d . .

Return Reference

Donated services and use of facilities . . . . .

2e

t line <b>2e</b> from line <b>1</b>						3
s included on Form 990, Part VIII, line 12, but not on line 1:						
nent expenses not included on Form 990, Part VIII, line 7b	4a			2	96,530	
Describe in Part XIII.)	4b					
s <b>4a</b> and <b>4b</b>						4c
venue. Add lines ${f 3}$ and ${f 4c.}$ (This must equal Form 990, Part I, line 12.)						5
Reconciliation of Expenses per Audited Financial Statem	ents	With	Exp	enses	per R	etu

2a 2b

2c

2d

4a

4b

Explanation

24,747,973

70,815,048

296.530

2e

3

4c

5

	3	153,635,426			
١					
	4c	296,530			
	5	153,931,956			
Return.					
_					
	1	227,845,067			

Page <b>5</b>	chedule D (Form 990) 2020 Page		
	ormation (continued)	Part XIII Supplemental Info	
	Explanation	Return Reference	

Schedule D (Form 990) 2020

### **Additional Data**

**Software ID:** 

**Software Version: EIN:** 31-0263158

Name: DISABLED AMERICAN VETERANS

## Supplemental Information

a potential and the contraction				
Return Reference	Explanation			
	INTENDED USE OF ENDOWMENT FUNDS DAV'S ENDOWMENT CONSISTS OF APPROXIMATELY 25 INDIVIDUAL FU NDS ESTABLISHED BY DONORS TO PROVIDE PERPETUAL SOURCE OF SUPPORT FOR DAV'S ACTIVITIES			

upplemental Information	
Return Reference	Explanation
PART XI, LINE 2D	Other Adjustments: Contributed Media and Materials \$70,815,048.

upplemental Information	
Return Reference	Explanation
PART XII, LINE 2D	Other Adjustments: Contributed Media and Materials \$70,815,048.

.

SCHEDULE G

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

DLN: 93493237008061 OMB No. 1545-0047

> **Open to Public Inspection**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Go to www.irs.gov/Form990 for instructions and the latest information.

Attach to Form 990 or Form 990-EZ.

Name of the organization **Employer identification number** DISABLED AMERICAN VETERANS 31-0263158 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants ✓ Phone solicitations Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have (or retained by) (or retained by) or entity (fundraiser) from activity custody or fundraiser listed in organization control of col. (i) contributions? Yes No SEE PART IV PUBLIC INT COMMUNICATIONS No 70,902 54,336 16,566 SEE PART IV CREATIVE DIRECT RESPONSE No 5,971,269 816,485 5,154,784 SEE PART IV MINDSET No 68,083,358 893,446 67,189,912 SEE PART IV **GRANTS PLUS** Nο 40,000 40,600 -600 SEE PART IV 60,000 SOCIAL CAPITAL No -60,000 SEE PART IV HARNESS CHANGE No 914 60,500 -59,586 1,925,367 74,166,443 72,241,076 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI, SC, TN, TX, UT, VA,

Par	t II Fundraising Events. Comple				
	than \$15,000 of fundraising e gross receipts greater than \$5		d gross income on Form	n 990-EZ, lines 1 and (	6b. List events with
	gross receipts greater than \$.	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. <b>(c)</b> )
	4. Consequencials				
	1 Gross receipts				
	<ul><li>2 Less: Contributions</li><li>3 Gross income (line 1 minus line 2)</li></ul>				
	<b>4</b> Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
٠	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
- 1	9 Other direct expenses	through 9 in column (d)			
	10 Direct expense summary. Add lines 4 t				
	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  11 Gaming. Complete if the organization.	from line 3, column (d)	es" on Form 990, Part I		1 more than \$15,000
ar	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10	from line 3, column (d)			d more than \$15,000
ar	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  11 Gaming. Complete if the organization.	from line 3, column (d)	es" on Form 990, Part I  (b) Pull tabs/Instant bingo/progressive bingo		d more than \$15,000  (d) Total gaming (add col.(a) through col.(c)
ar	10 Direct expense summary. Add lines 4 t  11 Net income summary. Subtract line 10  till Gaming. Complete if the organism on Form 990-EZ, line 6a.	from line 3, column (d) anization answered "Y	( <b>b</b> ) Pull tabs/Instant		(d) Total gaming (add
a r	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.	from line 3, column (d) anization answered "Y	( <b>b</b> ) Pull tabs/Instant		(d) Total gaming (add
ar	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "Y	( <b>b</b> ) Pull tabs/Instant		(d) Total gaming (add
21	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "Y	( <b>b</b> ) Pull tabs/Instant		(d) Total gaming (add
ar	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "Y	( <b>b</b> ) Pull tabs/Instant		(d) Total gaming (add
ar	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "You (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
a r	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "You (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
ar	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "You (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
a r	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	rom line 3, column (d) anization answered "You (a) Bingo  Yes	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
ar	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	rom line 3, column (d) anization answered "You (a) Bingo  Yes	(b) Pull tabs/Instant bingo/progressive bingo  Yes %  No	(c) Other gaming  Yes % No	(d) Total gaming (add
ar	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organization on Form 990-EZ, line 6a.  1 Gross revenue	(a) Bingo  Yes %  No  Chrough 5 in column (d)  t line 7 from line 1, column ion conducts gaming activities.	(b) Pull tabs/Instant bingo/progressive bingo  Yes%  No  nn (d)	(c) Other gaming  Yes%  No	(d) Total gaming (add col.(a) through col.(c))
	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organization on Form 990-EZ, line 6a.  1 Gross revenue	(a) Bingo  Yes %  In No  Through 5 in column (d)  It line 7 from line 1, column (d)  It line 3 from line 1, column (d)  It line 4 from line 1, column (d)  It line 5 from line 1, column (d)	(b) Pull tabs/Instant bingo/progressive bingo  Yes % No  nn (d)	(c) Other gaming  Yes % No	(d) Total gaming (add col.(a) through col.(c))
ar	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organization on Form 990-EZ, line 6a.  1 Gross revenue	(a) Bingo  Yes %  In No  Through 5 in column (d)  It line 7 from line 1, column (d)  Through 3 in column (d)  Through 4 in column (d)  Through 5 in column (d)	(b) Pull tabs/Instant bingo/progressive bingo  Yes % No  In (d)	(c) Other gaming  Yes % No	(d) Total gaming (add col.(a) through col.(c))

Sche	dule G (Form 990 or 990-EZ) 2020		Page	3
11	Does the organization conduct gaming	activities with nonmembers?	Yes 🗆 No	_
12		ry or trustee of a trust or a member of a partnership or other entity	Yes □ No	
13	Indicate the percentage of gaming acti	I I	2.03 = .00	
а	The organization's facility		9/	6
b	An outside facility		9/	6
14	Enter the name and address of the per	son who prepares the organization's gaming/special events books and records:		_
	Name •			
	Address •			
15a	<u> </u>	with a third party from whom the organization receives gaming	]Yes □No	
b		evenue received by the organization > \$ and the		
c	If "Yes," enter name and address of the	e third party:		
	Name •			
	Address ▶			
16	Gaming manager information:			
	Name 🕨			
	Gaming manager compensation $\blacktriangleright$ \$			
	Description of services provided ►			
	☐ Director/officer	☐ Employee ☐ Independent contractor		
17 a	Mandatory distributions:  Is the organization required under state retain the state gaming license? .	e law to make charitable distributions from the gaming proceeds to	]Yes □No	
b	Enter the amount of distributions requi	red under state law distributed to other exempt organizations or spent	1103	
	in the organization's own exempt activ			_
Pai		$oldsymbol{n}$ . Provide the explanations required by Part I, line 2b, columns (iii) and (5c, 16, and 17b, as applicable. Also provide any additional information. Se		
	Return Reference	Explanation		_
PART	TI, LINE 2B	(i) Name of Fundraiser: Public Interest Communication (i) Address: 7700 Leesburg Falls Church, VA 22043 (ii) Activity: Telemarketing - Recurring Gifts (i) Name of Ful Direct Response (i) Address: 16900 Science Drive, Bowie, MD 20715 (ii) Activity: Cand Organizes Electronic Fundraising (i) Name of Fundraiser: Mindset (i) Address: 1 Ste 200, Arlington, VA 22205 (ii) Activity: Direct Mail and Telemarketing (i) Name of Plus (i) Address: 1422 Euclid Ave. #650, Cleveland, OH 44115 (ii) Activity: Strateg Advisor (i) Name of Fundraiser: Social Capital (i) Address: 980 N. Michigan Ave. Ste 60611 (ii) Activity: Strategic Advisor on Corp Partner Planning (i) Name of Fundrais (i) Address: 100 N. Tampa St., Tampa, FL 33602 (ii) Activity: Recurring Giving Adv	ndraiser: Creative consults Direct Mail 170 N. Jefferson St. of Fundraiser: Grant ic Grant Program e 1610, Chicago, IL ser: Harness Change	s
PART	I, LINE 2B	Activity: DAV has identified gross receipts and expenses for organizations providing fundraising services in executing a campaign.	professional	-

efile GRAPHIC print - DO NOT PROCESS As Filed Data 
Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I

(Form 990)

Department of the

Internal Revenue Service

Treasury

## Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

2020

DLN: 93493237008061

Open to Public Inspection

ISABLED AMERICAN VETERANS							incacion number
						31-0263158	
Part I General Inform							
Does the organization mair the selection criteria used t	ntain records to sub to award the grants	stantiate the amount of or assistance?	the grants or assistance,	the grantees' eligibility	for the grants or assistanc	e, and	☑ Yes ☐ No
2 Describe in Part IV the orga	•	_	-				
Part II Grants and Other A	<b>Assistance to Don</b> than \$5,000. Part II	nestic Organizations a Ecan be duplicated if add	nd Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, l	ine 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
<ul><li>2 Enter total number of sections</li><li>3 Enter total number of other</li></ul>							4 56
3 Enter total number of other For Paperwork Reduction Act Notice			<u> </u>				Schedule I (Form 990) 2020
FOI PAPERWORK REQUESTION ACT NOTIC	e, see the Instructio	us for Form 990.		Cat. No. 5005	)r	:	ocnedule 1 (FOFM 990) 2020

2,862,303

Page **2** 

RELIEF				
(2) SCHOLARSHIPS	26	53,125		
(2)				
(3)				

(6)

(7)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

9190

Schedule I (Form 990) 2020

DISASTER & COVID-19 UNEMPLOYMENT

(1)

(4)

(5)

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part IV Explanation

**Return Reference** Part I, Line 2 GRANTS AND OTHER ASSISTANCE THE PROCEDURE FOR MONITORING THE USE OF GRANTS VARIES DEPENDING ON THE TYPE OF GRANT. FOR GRANTS TO DAV

DEPARTMENTS, EVERY DEPARTMENT IS REQUIRED TO SUBMIT AN ANNUAL FINANCIAL REPORT TO DAV FOR APPROVAL, REVIEW OF ANNUAL FINANCIAL REPORTS ALLOWS DAY TO MONITOR THE PROPER USE OF FUNDS GRANTED BY DAY AND TO ENSURE GOOD STANDING FOR CONTINUED ELIGIBILITY. EXPENSES FOR THE NATIONAL VETERANS WINTER SPORTS CLINIC AND VAN PROGRAM ARE SENT DIRECTLY TO AND ARE PAID BY DAV (DIRECTLY TO THE BILLING PARTY) WHEN DETERMINED THAT THE EXPENSE IS AN ACCEPTABLE AND QUALIFYING COST OF THE DESIGNATED PROGRAM. SCHOLARSHIP PAYMENTS TOWARDS TUITION ON

BEHALF OF AN ELIGIBLE AWARD RECIPIENT ARE PAID DIRECTLY TO THE ACADEMIC INSTITUTION. THE REMAINDER OF THE GRANTS ARE MADE ON A GOOD FAITH BASIS TO REPUTABLE ORGANIZATIONS WITH A HISTORY OF SERVICE TO DISABLED VETERANS. Schedule I (Form 990) 2020

#### **Additional Data**

Dept of Alabama

634 Halliana Rd

Dept of Alaska

3413 Conifer Dr North Pole, AK 99705

Alexander City, AL 35010

Software ID: **Software Version:** 

63-0421186

52-1648345

**EIN:** 31-0263158

Name: DISABLED AMERICAN VETERANS

72,975

10,268

Form 990	,Schedule I,	Part II	, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.

` '	` '		1 . ,	\ \ \ \	` '	
organization		if applicable	grant	cash	(book, FMV, appraisal,	ı
or government				assistance	other)	ı

(a) Name and address of (b) EIN (c) IRC section

501(c)(4)

501(c)(4)

(d) Amount of cash (e) Amount of non- (f) Method of valuation

(h) Purpose of grant

Veterans Services

(g) Description of non-cash assistance or assistance

Veterans Services

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Dept of Arizona 86-0191627 501(c)(4) 98.776 Veterans Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

38 W Dunlap Ave Phoenix, AZ 85021

N Little Rock, AR 72115

Dept of Arkansas 38-6143144 501(c)(4) 40.672 Veterans Services PO Box 1620

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of California 95-0684372 501(c)(4) 388.382 Veterans Services 13733 Rosecrans Santa Fe Springs, CA 90670

87,652

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

84-0388439

Dept of Colorado

1485 Holland St Lakewood, CO 80215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Dept of Connecticut 06-6050968 501(c)(4) 42.216 Veterans Services

35 Cold Spring Rd Rocky Hill, CT 06067

Washington, DC 20024

Dept of D C 31-1017322 501(c)(4) 8.339 Veterans Services PO Box 70737

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government ns Services

Dept of Delaware	23-7169083	501(c)(4)	10,833		Veterans
183 South St					
Camden, DE 19934					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Gainesville, FL 32607

Dept of Florida 59-0915376 501(c)(4) 261.770 Veterans Services 2015 SW 75th St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Georgia 58-6043522 501(c)(4) 90.540 Veterans Services 4462 Houston Ave Macon, GA 31206

21.318

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

99-0105357

Dept of Hawaii

2685 N Nimitz Hwy Honolulu, HI 96819

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Idaho 82-6013538 501(c)(4) 19.222 Veterans Services PO Box 1597

84.286

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

Meridian, ID 83869

Dept of Illinois

3740 Wabash Ave Springfield, IL 62704 36-2026733

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Dept of Indiana 35-0269110 501(c)(4) 68.513 Veterans Services 170 Airport Parkway Greenwood, IN 46143

27.094

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

42-0218615

Dept of Iowa

2245 Kerper Blvd Dubuque, IA 52001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Kansas 48-0669371 501(c)(4) 33.181 Veterans Services

77.368

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

61-0574614

PO Box 67684 Topeka, KS 66667 Dept of Kentucky

PO Box 129

Shepherdsville, KY 40165

(e) Amount of non-(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government ns Services

Dept of Louisiana PO Box 1271 Baton Rouge, LA 70821	72-6023897	501(c)(4)	45,079		Veterans Services
Dept of Maine	51-0169791	501(c)(4)	27,365		Veterans Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Dept of Maine PO Box 3415

Augusta, ME 04330

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 52-6055613 501(c)(4) 92.850 Veterans Services

Dept of Maryland 101 N Gay Baltimore, MD 21202

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Boston, MA 02133

Dept of Massachusetts 04-2170836 501(c)(4) 120,864 Veterans Services 24 Beacon St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Michigan 38-0489155 501(c)(4) 107.760 Veterans Services

17779 E Fourteen Mile Rd Fraser, MI 48026

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

St Paul, MN 55155

Dept of Minnesota 41-0641627 501(c)(4) 103,167 Veterans Services 20 West 12th St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Services

Dept of Mississippi PO Box 1579 Jackson, MS 39215	64-6034899	501(c)(4)	19,457		Veterans S

82.610

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

43-1428547

Dept of Missouri

411 F Northtown Rd Kirksville, MO 63501

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Montana 81-0245122 501(c)(4) 14.965 Veterans Services PO Box 201

PO Box 201 Helena, MT 59624

Dept of Nebraska 47-0462717 501(c)(4) 30,837

Veterans Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3107 25th St Columbus, NE 68601

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Nevada 88-0191079 501(c)(4) 30.717 Veterans Services 2775 Meadow Park Ave Henderson, NV 89052

25,953

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

Dept of New Hampshire

Manchester, NH 03108

PO Box 5184

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Dept of New Jersey 31-1017334 501(c)(4) 87.951 Veterans Services 171 Jersey St Trenton, NJ 08611

36,504

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

Dept of New Mexico

2511 Utah St NE Albuquerque, NM 87110

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of New York 11-2248726 501(c)(4) 180.352 Veterans Services 162 Atlantic Ave

85.323

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

Lynbrook, NY 11563

Dept of North Carolina

PO Box 90968 Raleigh, NC 27675

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of North Dakota 45-0232777 501(c)(4) 16.346 Veterans Services 3812 Lakewood Dr Mandan, ND 58554

135.024

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

31-4166963

Dept of Ohio

35 E Chestnut St Columbus, OH 43215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Oklahoma 73-6112085 501(c)(4) 69.073 Veterans Services 14083 S State Hwy 51 Coweta, OK 74429

37.198

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

93-0155562

Dept of Oregon

37615 SE Gordon Creek Rd Corbett, OR 97019

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Pennsylvania 23-0520283 501(c)(4) 158.181 Veterans Services 4219 Trindle Rd

32.161

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

Camp Hill, PA 17011

Dept of Puerto Rico

PO Box 363604 San Juan, PR 00936

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government ns Services

Dept of Rhode Island	05-6023646	501(c)(4)	16,747		Veterans
1 Capital Hill			l		
Providence, RI 02908					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

West Columbia, SC 29171

Dept of South Carolina 57-0600471 501(c)(4) 73.777 Veterans Services PO Box 5317

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of South Dakota 46-6016959 501(c)(4) 17.932 Veterans Services 1519 West 51st St Sioux Falls, SD 57105

64.433

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

Dept of Tennessee

Lawrenceburg, TN 38464

PO Box 296

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Dept of Texas 75-6053959 501(c)(4) 278.311 Veterans Services

1015 Lee Ave Lufkin, TX 75901

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

273 F 800 South Salt Lake City, UT 84111

Dept of Utah 87-6151236 501(c)(4) 19.981 Veterans Services

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Dept of Vermont 03-6015639 501(c)(4) 9.818 Veterans Services PO Box 828 White River Jct, VT 05001

153.151

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

54-0697376

Dept of Virginia

PO Box 7176 Roanoke, VA 24019

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Dept of Washington 91-0544487 501(c)(4) 88.343 Veterans Services

26.949

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

4980 Auto Center Way Bremerton, WA 98312

Dept of West Virginia

PO Box 605 Elkview, WV 25071

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Dept of Wisconsin 39-0244255 501(c)(4) 59.492 Veterans Services 1253 Scheuring Rd DePere, WI 54115

11.432

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

Dept of Wyomina

219 Ames Ave Cheyenne, WY 82007

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Department of Veterans Affairs 52-1688621 Gov't Entity 201.374 IVA Transportation 51 Irvina St Network Washington, DC 20423 Columbia Trust Service 52-1516071 501(c)(4) 23.450 Veterans Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Programs

3725 Alexandria Pike Cold Spring, KY 41076

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government ts for Veterans

Children of Veterans

Boulder Crest Retreat	27-3228310	501(c)(3)	125,000		Retreats
33735 Snickersville Tpke					
Bluemont, VA 20135					

356,250

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

45-3555807

Camp Corral

5151 Glenwood Ave Raleigh, NC 27612

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government ans Services

Arthur H. & Mary Wilson

Award

Hillvets Foundation	47-3616097	501(c)(19)	25,000		Veterans
625 N Washington St			·		
Alexandria, VA 22314					

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Six and Twenty Distillery

3109 Highway 153

Piedmont, SC 29673

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 35-0144250 501(c)(19) 25.000 Salute to Heroes The American Legion

PO Box 1055 Indianapolis, IN 46206					Inaugural Gala
Military Veterans in Journalism Inc	83-4253287	501(c)(3)	7,600		NAB Sponsorship

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

100 K St

Washington, DC 20002

efil	le GRAPHIC	print - DO NOT PROCESS	As Filed Dat	a -	DLN: 9349	323	7008	061
Sch	nedule J	С	ompensat	ion Information	ОМВ	No.	1545-(	0047
(Fori	m 990)		Compensa ganization answ	Trustees, Key Employees, and High ated Employees vered "Yes" on Form 990, Part IV, a to Form 990.	est line 23.	20	20	<b>)</b>
•	tment of the Treasu	*		instructions and the latest inform			o Pul ectio	
	al Revenue Service me of the orgar				Employer identification			
DIS	ABLED AMERICAN	VETERANS			31-0263158			
Pa	Tit U Ques	tions Regarding Compens	ation		51 0205150			
							Yes	No
1a				f the following to or for a person listed ly relevant information regarding these				
		ss or charter travel		Housing allowance or residence for pe	ersonal use			
		or companions		Payments for business use of persona				
		mnification and gross-up paymer	_	Health or social club dues or initiation				
	<b>✓</b> Discreti	onary spending account	Ц	Personal services (e.g., maid, chauffe	eur, chef)			
b				follow a written policy regarding paym ve? If "No," complete Part III to explai		<b>1</b> b	Yes	
2				or allowing expenses incurred by all		2	Yes	
	directors, trus	tees, officers, including the CEO/	Executive Directo	r, regarding the items checked on Line	e 1a?			
3	organization's	CEO/Executive Director. Check a	all that apply. Do i	ed to establish the compensation of the not check any boxes for methods CEO/Executive Director, but explain in				
	Compa	nsation committee		Written employment contract				
		ndent compensation consultant	<b>\overline{\sigma}</b>	Compensation survey or study				
		90 of other organizations	<u></u> ✓	Approval by the board or compensati	on committee			
4	During the ye related organ		990, Part VII, Se	ction A, line 1a, with respect to the fili	ng organization or a			
а	Receive a sev	erance payment or change-of-co	ntrol payment? .			4a		No
b		or receive payment from, a supp				4b		No
c			,	nsation arrangement?		4c		No
	0	(2) F04(-)(4)   F04(-)(20	· · · · · · · · · · · · · · · · · · ·	t				
5	, , ,	(3), 501(c)(4), and 501(c)(29	, ,	the organization pay or accrue any				
,	compensation	contingent on the revenues of:	on A, line 1a, did	the organization pay or accrue any				
а	The organizat	ion?				5a		No
b	-					5b		No
	If "Yes," on li	ne 5a or 5b, describe in Part III.						
6		sted on Form 990, Part VII, Secti contingent on the net earnings o		the organization pay or accrue any				
а	The organizat	ion?				6a		No
b	,	•		$\ldots = \ldots =$		6b		No
	•	ne 6a or 6b, describe in Part III.						
7				the organization provide any nonfixed rt III		7	Yes	
8	subject to the	initial contract exception describ	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," des · · · · · · · · · · · · ·		8		No
9				presumption procedure described in R		9		140
For F	Panerwork Re	duction Act Notice, see the In	structions for Fo	orm 990. Cat. No. 50	053T Schedule J (	Form	990)	2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
	,		(ii) Bonus & incentive compensation (iii) Other reportable compensation		other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990	
J MARC BURGESS IATL ADJUTANT/CEO/SEC.	(i)	263,725	50,065	7,517	252,926	29,163	603,396	49,565	
, 525, 525, 525, 525, 525, 525, 525	(ii)	0	0	0	0	0	0		
ANITA BLUM COMPTROLLER	(i)	172,261	19,585	4,937	173,059	43,696	413,538	19,085	
COMPTROLLER	(ii)	0	0	0	0	0	0		
CHRISTOPHER CLAY GENERAL COUNSEL	(i)	206,433	12,798	14,145	27,508	34,153	295,037	12,798	
BENERAL COUNSEL	(ii)	0	0	0	0	0	0		
BRIAN COWART CHIEF DEV. OFFICER	(i)	212,497	19,310	4,719	85,674	36,680	358,880	18,810	
THIEF DEV. OFFICER	(ii)	0	0	0	0	0	0		
SUSAN LOTH	(i)	170,097	20,144	4,933	193,892	41,506	430,572	19,644	
SR. CHIEF DEV. OFFICER	(ii)	0	0	0	0	0	0		
JAMES MARSZALEK	(i)	161,116	25,660	3,351	95,285	21,351	306,763	25,160	
JATIONAL SERVICE DIRECTOR	(ii)	0	0	0	0	0	0		
BARRY A JESINOSKI	(i)	211,694	37,930	4,719	209,603	42,599	506,545	37,430	
EXEC. DIR. NATL HQ		0	0	0	0		0		
B EDWARD R REESE	(ii) (i)	198,994	35,749	4,729	261,205	46,012	546,689	35,249	
EXEC. DIR. NATL LHQ		0	0	0	0	0	0		
	(ii)			0		U	J J		

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A	FIRST CLASS OR CHARTER TRAVEL: DAV-PAID AIRFARE IS TYPICALLY FOR COACH-CLASS TRAVEL. FIRST-CLASS AIRFARE MAY BE APPROVED ON A CASE BY CASE
	BASIS CONSIDERING SUCH FACTORS AS: (A) DISABILITY OF THE TRAVELER (B) SIZE OF THE TRAVELER; (C)DISTANCE TRAVELED; (D) COST ANALYSIS; AND (E)
	OTHER REASONABLE FACTORS. DAV DOES NOT PAY FOR CHARTER TRAVEL. IN 2020, NO FIRST CLASS OR CHARTER TRAVEL BUSINESS TRIPS WERE PROVIDED
	FOR INDIVIDUALS LISTED ON FORM 990 PART VII. TRAVEL FOR COMPANIONS: DAV PAYS FOR COMPANIONS OF THOSE TRAVELING ON DAV BUSINESS, BUT ON A
	VERY LIMITED BASIS. SUCH AUTHORIZATION IS ONLY GRANTED WHEN THE COMPANION'S PRESENCE PROVIDES NEEDED AID AND ASSISTANCE FOR A
	SIGNIFICANTLY DISABLED DAV TRAVELER. IN THE CASE OF THE DAV TRAVELER REQUIRING AID AND ASSISTANCE, DAV WILL BEAR THE FULL EXPENSE OF THE
	COMPANION AND IT IS NOT CONSIDERED TAYARIE INCOME. IN 2020, NO COMPANION TRAVEL WAS PROVIDED FOR INDIVIDUALS LISTED ON FORM 600 PART

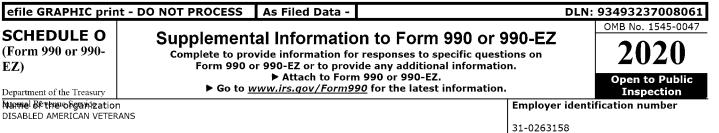
ICOMPANION AND IT IS NOT CONSIDERED TAXABLE INCOME. IN 2020, NO COMPANION TRAVEL WAS PROVIDED FOR INDIVIDUALS LISTED ON FORM 990 PART IVII. DISCRETIONARY SPENDING ACCOUNT: DURING THEIR ONE-YEAR, NON-SUCCESSIVE TERM, DAV PAYS THE NATIONAL COMMANDER AN ANNUAL EXPENSE ALLOWANCE PRORATED FROM THE DATE OF HIS/HER ELECTION TO THE DATE OF THE ELECTION OF HIS/HER SUCCESSOR, IN AN AMOUNT APPROVED BY THE BOARD OF DIRECTORS, AND REFLECTED IN THE APPROPRIATE MINUTES. THE AMOUNT IS TO COVER LODGING, MEALS, AND OTHER EXPENSES INCURRED TO SERVE IN THIS CAPACITY. IT IS COMPARABLE TO AMOUNTS PAID THOSE IN SIMILAR POSITIONS IN LIKE ORGANIZATIONS AND IS REPORTED AS TAXABLE INCOME ON FORM 1099. IN 2020, STEPHEN WHITEHEAD, DAV NATIONAL COMMANDER, RECEIVED \$225,000 FOR SUCH PAYMENTS.

SCHEDULE J, PART I, LINE 7 NON-FIXED PAYMENTS DAV HAS A LEADERSHIP INCENTIVE PROGRAM THAT OFFERS AN ADDITIONAL PERCENTAGE OF ANNUAL BASE SALARY TO ABOUT 60 EMPLOYEES - PRIMARILY KEY EXECUTIVES, DIRECTORS AND MANAGERS. THE AWARD PERCENTAGE IS BASED ON THE INDIVIDUAL PARTICIPANT'S POSITION AND

ITHE ORGANIZATION'S MEASURED SUCCESS MEETING 8 GOALS - ONE RELATED TO ACHIEVEMENT OF STANDARD RATIOS PUBLISHED BY THE BBB WISE GIVING

DLN: 93493237008061 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2020 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** DISABLED AMERICAN VETERANS 31-0263158 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods . . . . . Cars and other vehicles **7** Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Χ 528,522 COST / SELLING PRICE 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ ( \_\_\_ 26 Other ▶ ( \_\_\_\_\_\_) 27 Other ▶ ( \_\_\_\_\_\_) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2020) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2020)	Page <b>2</b>
is reporting in Part I, col	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also by additional information.
Return Reference	Explanation
Schedule M, Part I, Column (b)	For Securities - Publicly Traded the number of contributions is reported.
	Schedule M (Form 990) (2020)



FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS  SERVICE PROGRAM (CONT) NATIONAL SERVICE OFFICES - IN MORE THAN 100 OFFICES THROUGHOUT THE UNITED STATES AND IN PUERTO RICO, WE EMPLOY A CORPS OF NATIONAL BENEFITS ADVOCATES, NATION AL SERVICE OFFICERS (NSOS) AND TRANSITION SERVICE OFFICERS (TSOS) WHO COUNSEL AND REPRESEN T VETERANS, THEIR FAMILIES AND SURVIVORS WITH CLAIMS FOR BENEFITS FROM THE DEPARTMENT OF V ETERANS AFFAIRS, DEPARTMENT OF DEFENSE AND OTHER GOVERNMENT AGENCIES. SERVICE OFFICERS FUN CTION AS ATTORNEYS-IN-FACT, ASSISTING VETERANS, THEIR FAMILIES AND SURVIVORS IN FILING CLA IMS FOR VA DISABILITY COMPENSATION, REHABILITATION AND EDUCATION PROGRAMS, PENSIONS, DEATH BENEFITS, AND EMPLOYMENT AND TRAINING PROGRAMS. THEY PROVIDE FREE SERVICES, SUCH AS COUNS ELING AND COMMUNITY OUTREACH ACTIVITIES THROUGH THE INFORMATION SEMINAR PROGRAM, IN ORDER TO EDUCATE AND INFORM VETERANS ON THE BENEFITS THEY HAVE EARNED THROUGH SERVICE. THEY ALSO ADVISE VETERANS AND ACTIVE-DUTY MILITARY PERSONNEL IN REGARDS TO THE TRANSITION ASSISTANC E PROGRAM. SINCE BEING CHARTERED BY CONGRESS IN 1932, THEY FILED 11.8 MILLION CLAIMS FOR B ENEFITS. TRAINING - DAV'S NATIONAL BENEFITS ADVOCATES TRAIN THROUGHOUT THEIR CAREERS TO ST AY CURRENT WITH THE CHANGES IN LAWS AND REFULLATIONS AFFECTING VETERANS' BENEFITS. THE INTE RACTIVE TRAINING, RESEARCH, ADVOCACY AND KNOWLEDGE SYSTEM, KNOWN AS ITRAK, HAS MADE THE IN STITUTIONAL KNOWLEDGE OF DAV'S NATIONAL SERVICE OFFICER PROGRAM ACCESSIBLE NATIONWIDE. THIS SYSTEM REVOLUTIONIZES HOW DAY SERVES VETERANS, TRAINS SERVICE OFFICERS, AND RESEARCHES A ND COLLABORATES TO REPRESENT VETERANS IN THEIR CLAIMS FOR BENEFITS. THIS ONGOING TRAINING ENSURES THAT ALL DAY NATIONAL SERVICE OFFICERS ARE AMINTAINED. NATIONAL SERVICE OFFICERS SATE EDUCATED PROFESSIONAL STANDARDS ARE MAINTAINED. NATIONAL SERVICE OFFICERS CLAIMS THROUGH IN-DEPTH REVIEWS OF MEDICAL HISTORIES ALONG WITH CURRENT LAWS AND REGULATION S. ADDITIONALLY, THEY REVIEW RATING BOARD DECISIONS AND INFORM VETERANS AND THEIR FAMILIES	Return Reference	Explanation
ANATOMY AND PHYSIOLOGY, PATHOPHYSIOLOGY, MEDICAL TERMINOL OGY AND INTRODUCTION TO PUBLIC POLICY, TOPICS IN PUBLIC ADMINISTRATION, AND ADMINISTRATIVE LAW. IN ADDITION TO THESE TRAINING PROGRAMS, SUPERVISORY STAFF AND SELECTED VETERAN ADVOC ATES FROM FIELD OFFICES ACROSS	FORM 990, PART III, LINE 4A, PROGRAM SERVICE	SERVICE PROGRAM (CONT) NATIONAL SERVICE OFFICES - IN MORE THAN 100 OFFICES THROUGHOUT THE UNITED STATES AND IN PUERTO RICO, WE EMPLOY A CORPS OF NATIONAL BENEFITS ADVOCATES, NATION AL SERVICE OFFICERS (NSOS) AND TRANSITION SERVICE OFFICERS (TSOS) WHO COUNSEL AND REPRESEN T VETERANS, THEIR FAMILIES AND SURVIVORS WITH CLAIMS FOOR BENEFITS FROM THE DEPARTMENT OF V ETERANS AFFAIRS, DEPARTMENT OF DEFENSE AND OTHER GOVERNMENT AGENCIES. SERVICE OFFICERS FUN CTION AS ATTORNEYS-IN-FACT, ASSISTING VETERANS, THEIR FAMILIES AND SURVIVORS IN FILING CLA IMS FOR VA DISABILITY COMPENSATION, REHABILITATION AND EDUCATION PROGRAMS, PENSIONS, DEATH BENEFITS, AND EMPLOYMENT AND TRAINING PROGRAMS. THEY PROVIDE FREE SERVICES, SUCH AS COUNS ELING AND COMMUNITY OUTREACH ACTIVITIES THROUGH THE INFORMATION SEMINAR PROGRAM, IN ORDER TO EDUCATE AND INFORM VETERANS ON THE BENEFITS THEY HAVE EARNED THROUGH SERVICE. THEY ALSO ADVISE VETERANS AND ACTIVE-DUTY MILITARY PERSONNEL IN REGARDS TO THE TRANSITION ASSISTANC E PROGRAM. SINCE BEING CHARTERED BY CONGRESS IN 1932, THEY FILED 11.3 MILLION CLAIMS FOR B ENEFITS. TRAINING - DAY'S NATIONAL BENEFITS ADVOCATES TRAIN THROUGHOUT THEIR CAREERS TO ST AY CURRENT WITH THE CHANGES IN LAWS AND REGULATIONS AFFECTING VETERANS' BENEFITS. THE INTERACTIVE TRAINING, RESEARCH, ADVOCACY AND KNOWLEDGE SYSTEM, KNOWN AS ITRAK, HAS MADE THE IN STITUTIONAL KNOWLEDGE OF DAY'S NATIONAL SERVICE OFFICER PROGRAM ACCESSIBLE NATIONWIDE. THIS SYSTEM REVOLUTIONIZES HOW DAY SERVES VETERANS, TRAINS SERVICE OFFICERS, AND RESEARCHES A ND COLLABORATES TO REPRESENT VETERANS IN THEIR CLAIMS FOR BENEFITS. THIS ONGOING TRAINING ENSURES THAT ALL DAY NATIONAL SERVICE OFFICERS ARE AT THE FOREFRONT OF VETERANS' ADVOCACY AND THAT THE MOST RIGOROUS PROFESSIONAL STANDARDS ARE MAINTAINED. NATIONAL SERVICE OFFICERS ARE AD THAT FOR BENEFITS. THIS ONGOING TRAINING ENSURES THAT ALL DAY NATIONAL SERVICE OFFICERS ARE AT THE FOREFRONT OF VETERANS AND THEIR FAMILIES OF THE APPELLS PROCESS AND A SHILL SOFT HE APPELLS PROCESS TO KEEP THEIR CUTTING-EDGE

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	THE COUNTRY RECEIVE SPECIALIZED INSTRUCTION IN MANAGEMENT AND LEADERSHIP DEVELOPMENT. OUR GOAL IS TO CONTINUE PRODUCING THE MOST HIGHLY TRAINED REPRESENTATIVES POSSIBLE TO BEST SE RVE VETERANS AND THEIR FAMILIES. NATIONAL APPEALS OFFICE - THE BOARD OF VETERANS' APPEALS (BVA) IS THE HIGHEST APPELLATE-LEVEL COURT WITHIN THE VA AND IS RESPONSIBLE FOR THE FINAL DECISION CONCERNING VETERANS' BENEFITS. MORE THAN 96% OF THE CLAIMS BEFORE THE BVA INVOLVE DISABILITY COMPENSATION ISSUES. OUR HIGHLY SKILLED NATIONAL APPEALS OFFICERS SERVE APPELL ANTS IN THE PREPARATION OF WRITTEN BRIEFS FOR BVA REVIEW AND CONDUCT FORMAL HEARINGS BEFOR E VETERANS' LAW JUDGES. DAV'S EFFORTS HAVE RESULTED IN APPROXIMATELY 77% OF DECISIONS BEIN G OVERTURNED DOR CASES BEING REMANDED TO THE REGIONAL OFFICE FOR ADDITIONAL DEVELOPMENT AND RE-ADJUDICATION. WE MAINTAIN THE LARGEST STAFF OF ANY ADVOCACY GROUP AND REPRESENTED 19.5 % OF ALL CASES DECIDED BY THE BVA IN 2020. JUDICIAL APPEALS - DAV CONTINUES ITS PRO BONO R EPRESENTATION PROGRAM FOR VETERANS SEEKING REVIEW IN THE UNITED STATES COURT OF APPEALS FO R VETERANS CLAIMS. DAV CURRENTLY WORKS WITH TWO LAW FIRMS THAT SPECIALIZE IN REPRESENTING VETERANS (SLEUSES AT THE COURT. IN FISCAL YEAR 2020, THE BVA ACTED ON MORE THAN 16,400 CASE S INVOLVING DAV CLIENTS. THESE WERE CASES REVIEWED TO IDENTIFY THOSE IN WHICH A VETERAN'S CLAIM WAS IMPROPERLY DENIED. THE RELATIONSHIP BETWEEN DAV AND THESE PRIVATE LAW FIRMS HAS RESULTED IN OVER 1,200 CASES PREVIOUSLY DENIED BY THE BVA BRICA APPEALED TO THE COURT AT N O COST TO THE VETERANS. THESE DEDICATED LEGAL PARTNERS HAVE ENABLED THIS PROGRAM PROVIDED BIR ECT ON-SITE ASSISTANCE TO INJURED AND ILL ACTIVE-DUTY MILLTARY PERSONNEL THROUGH OUR TRANS ITION SERVICE PROGRAM, CURRENTLY IN 1TS 19TH YEAR THIS PROGRAM PROVIDED BIR ECT ON-SITE ASSISTANCE TO INJURED AND ILL ACTIVE-DUTY MILLTARY INSTALLATIONS WITHIN THE COUNTENAL UNITED STATES AND HAWAII. IN 2020, DAV CONDUCTED OVER 300 BRIEFINGS TO SEPARATING SERVICE MEMBERS, REACH ING OVER THAN 19,000 MILLTARY INSTALLATION

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	V BENEFITS ADVOCATES HAVE THE COOPERATION, SUPPORT AND ASSISTANCE OF DEPARTMENT AND CHAPTE R SERVICE OFFICERS ACROSS THE COUNTRY. PARTICIPATING DEPARTMENTS AND CHAPTERS RECEIVE TRAI NING AND INFORMATION NECESSARY TO ASSIST THOSE WE SERVE. OUR DEPARTMENT AND CHAPTER SERVICE COFFICER CERTIFICATION TRAINING PROGRAM GUARANTEES THE VITALITY AND GROWTH OF OUR LOCAL S ERVICE PROGRAMS, WHICH PROVIDE AN ENVIRONMENT WHERE OUR HOSPITAL SERVICE COORDINATORS, DEP ARTMENT AND CHAPTER SERVICE OFFICERS, AND VOLUNTEERS WORK TOGETHER FOR THE COMMON GOAL OF SERVICE TO INJURED AND ILL VETERANS. CURRENTLY, DAV HAS TRAINED AND CERTIFIED DEPARTMENT A ND CHAPTER SERVICE OFFICERS IN ALL 50 STATES AS WELL AS WASHINGTON, D.C., AND PUERTO RICO. THE PROGRAM ALLOWS FOR LEVEL I AND LEVEL II CERTIFICATION TRAINING FOR DEPARTMENT AND CHAPTER SERVICE OFFICERS. LEVEL I TRAINING IS DESIGNED TO TEACH AND FAMILIARIZE THE ROLE OF A CHAPTER OR DEPARTMENT SERVICE OFFICER BY INTRODUCING BASIC CLAIM INFORMATION AND THE DIFF ERENT APPLICATIONS REQUIRED TO APPLY FOR A WIDE ARRAY OF BENEFITS. LEVEL II CERTIFICATION IS MORE IN-DEPTH TRAINING IN SPECIFIC CLAIM INFORMATION ON TOPICS INCLUDING THE THREE ELEM ENTS OF SERVICE CONNECTION, THE PROCESS AND REQUIREMENTS FOR HAVING A DECISION RECONSIDERE D, PRESUMPTIVE CONDITIONS AND HOW THEY RELATE WITH DIFFERENT PERIODS OF SERVICE AND CONFLICTS, THE IMPORTANCE OF MEDICAL EVIDENCE AND THE USE OF THE COMBINED RATING TABLE. DEPARTMENT AND CHAPTER SERVICE OFFICERS PROVIDE A UNIQUE OPPORTUNITY FOR VETERANS TO DISCUSS VA BE NEFITS IN THEIR OWN COMMUNITIES WITHOUT MAKING A TRIP INTO A NATIONAL SERVICE OFFICE, WHICH ALSO GIVES CHAPTERS AN OPPORTUNITY TO CONNECT WITH VETERANS. VETERANS ARE ALSO INFORMED OF LOCAL RESOURCES AND OPPORTUNITIES TO GIVE BACK AND SUPPORT THEIR FELLOW VETERANS THROUGH THEIR LOCAL DAV DEPARTMENT OR CHAPTER. COUNTING ALL NATIONAL, TRANSITION, DEPARTMENT, CH APTER AND COUNTY VETERAN SERVICE OFFICERS, DAV HAS OVER 4,000 EXPERT BENEFITS ADVOCATES NA TIONWIDE WHO PROVIDE REPRESENTATION FOR VETERANS. EXPE

Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	VOLUNTARY SERVICES PROGRAM (CONT) - THE VALUE OF VOLUNTEER HOURS AND SERVICES AMOUNTED TO OVER \$18 MILLION. TO INCENTIVIZE YOUTH VOLUNTEERS, DAV AWARDED \$75,000 IN SCHOLARSHIPS THR OUGH ITS SCHOLARSHIP PROGRAM. DAV TRANSPORTATION NETWORK - A UNIQUE PROGRAM THAT HAS SUCCE SSFULLY HELPED VETERANS GET TO AND FROM THEIR MEDICAL APPOINTMENTS AND THROUGHOUT THEIR DA ILY LIVES FOR NEARLY 35 YEARS. THE PROGRAM IS THE LARGEST OF ITS KIND FOR VETERANS IN THE NATION. OPERATED BY DEDICATED DAV VOLUNTEER DRIVERS, THE PROGRAM PROVIDES TRANSPORTATION. TO AND FROM 228 VA MEDICAL CENTERS AND OUTPATIENT CLINICS. IT IS MANAGED BY A TEAM OF 155 H OSPITAL SERVICE COORDINATORS. SINCE THE PROGRAM'S INCEPTION IN 1987, DAV DEPARTMENTS AND C HAPTERS HAVE DONATED 3,558 VEHICLES AND FORD MOTOR CO. HAS DONATED 239 VEHICLES, AT A TOTA L COMBINED COST OF MORE THAN \$88 MILLION. THE AMOUNT OF HOURS DAV VOLUNTEERS DEDICATE, THE MILES THEY DRIVE AND THE NUMBER OF RIDES THEY PROVIDE TO VETERANS ARE A TESTAMENT TO THE PROMISES WE'VE ENSURED WERE KEPT. TO PUT THIS INTO PERSPECTIVE, DAV VOLUNTEERS DEDICATE, THE MILES THEY DRIVE AND THE NUMBER OF RIDES THEY BROVIDE TO VETERANS ARE A TESTAMENT TO THE PROMISES WE'VE ENSURED WERE KEPT. TO PUT THIS INTO PERSPECTIVE, DAV VOLUNTEERS HAVE DRIVEN 760,547,592 MILES SINCE THE PROGRAM BEGAN. THE BENEFIT OF DAV'S TRANSPORTATION NETWORK GO ES BEYOND ENSURING VETERANS IN NEED ARE ABLE TO GET THE CARE THEY DESERVE AND HAVE EARNED. WITHOUT THIS PROGRAM, MANY VETERANS WOULD HAVE NO WAY TO ACCESS THEIR HEALTH CARE. ACCORD ING TO NONPROFIT COALITION INDEPENDENT SECTOR'S METHODOLOGY, THE DEPARTMENT OF YETERANS AND SECONDOLOGY, THE DEPARTMENT OF VETERANS A FAIRS HAS VALUED THE DAY TRANSPORTATION NETWORK'S HOUR. ADDITIONALLY, EACH VETERAN PASSEN GER COULD POTENTIALLY COST THE VA \$0.415 PER MILE IN BENEFICIARY TRAVEL EXPENSE REIMBURSEM ENT FOR TRAVEL TO AN APPOINTMENT OR TREATMENT. THE TRANSPORTATION NETWORK CONTINUES TO PRO VIDE A SUBSTANTIAL NEED FOR VETERANS, WHILE DELIVERING A POWERFUL HAPPOON THE VA SOLOTION OF THE VE

5. 5.	
Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	FIGITS OR EVEN TOTAL BLINDNESS TO TAKE PART IN THE CLINIC TO DEVELOP WINTER SPORTS SKILLS AND TAKE PART IN A VARIETY OF WORKSHOPS AND EDUCATIONAL SESSIONS. THE EVENT ENCOURAGES VET ERANS TO CHALLENGE THEIR PERCEIVED LIMITATIONS AND PROMOTES BOTH MENTAL AND PHYSICAL READ AND RESTORATION THROUGH ADAPTIVE SKIING, ROCK WALL CLIMBING, ICE HOCKEY AND OTHER ROTH STANDAY OF THE RESEAUTION OF THE RESEAUTION OF THE RESEAUTION OF THE RESEAUTION OF THE SEAUTION OF THE RESEAUTION OF THE SEAUTION OF THE GULF WAR AND THE WARS IN INRAQ AND AFGHANISTAN, ATTEND THE CLINIC, ENJOY ING THE CAMARADERIE AND REASSURANCE OF THOSE WHO ALSO SERVED. NATIONAL DISABLED VETERANS TEE (TRAINING, EXPOSURE, EXPERIENCE) TOURNAMENT, DAY TAKES GREAT PRIDE IN PRESENTING THE NATIONAL DISABLED VETERANS TEE (TRAINING, EXPOSURE, EXPERIENCE) TOURNAMENT IN IOWA CITY, IOWA, WITH OUR PARTNERS AT THE VA. THE FOUR-DAY CLINIC CONSISTS OF GOLF, HORSEBACK RIDING AND OTHER ADAPTIVE SPORTS WORKSHOP S. THE CLINIC THAT ANNUALLY WELCOMES NEARLY 300 INJURED AND DISABLED VETERANS WOULD NOT BE ABLE TO HAPPEN WITHOUT THE HELP OF THE OVER 1,000 VOLUNTEERS WHO ATTEND THE EVENT YEAR. UNFORTUNATELY, THIS EVENT WAS ALSO CANCELED DUE TO THE ONGOING PANDEMIC IN 2020. WE LOK FORWARD TO CO-PRESENTING THIS EVENT WHEN IT IS ONCE AGAIN SAFE TO DO SO. MENTORING RET REATS - DAY, IN ASSOCIATION WITH BOULDER CREST RETREAT AND THE GARY SINISE FOUNDATION, IS COMMITTED TO IMPROVING THE PHYSICAL, EMOTIONAL, SPIRITUAL AND MONETARY WELL-BEING OF OUR N ATION'S MILITARY MEMBERS, VETERANS, FIRST RESPONDERS AND THEIR FAMILY WEMBERS. DAY PARTICI PATES IN FIVE RETREATS ANNUALLY FOR ILL AND INJURED VETERANS, INCLUDING ONE ALL-FEMALE VET ERAN RETREAT, AT BOULDER CREST'S LOCATIONS IN BLUEMONT, VIRGINIA, AND SONOITA, ARIZONA. DAY IS PROUD TO DISCOVER AND WORK TOGETHER ON NEW AND HOLLISTIC WAYS TO THE LATEST GENERATION OF SERIOUSLY INJURED VETERANS. THERE ON NEW AND HOLLISTIC WAYS TO THE LETERAS INCLUDING SEVERAL DAY PAST NATIONAL COMMANDER

Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	LAPIGNATION.  JURED VETERANS THROUGH A WEEKLONG PROGRAM WHERE THEY ARE INTRODUCED TO YOGA,  MEDITATION, EQUINE THERAPY, ARCHERY AND CAREER-BUILDING EXERCISES. YOUTH VOLUNTEERS - THE  SIGNIFICANCE OF YOUNG VOLUNTEERS PROVIDING CARE TO OUR NATION'S HEROES AND STRENGTHENING  THEIR LOCAL COMMUNITIES IS EVER-PRESENT AND REPRESENTED THROUGH DAY'S. JESSE BROWN  MEMORIAL YOUTH SCHOLA RSHIP PROGRAM. ANNUALLY, OUR SCHOLARSHIP PROGRAM RECOGNIZES  OUTSTANDING YOUNG VOLUNTEERS WHO PARTICIPATE IN THE VA VOLUNTARY SERVICE (VAVS) PROGRAM,  MEMORIAL YOUTH SCHOLA RSHIP PROGRAM. ANNUALLY, OUR SCHOLARSHIP PROGRAM RECOGNIZES  OUTSTANDING YOUNG VOLUNTEERS WHO PARTICIPATE IN THE VA VOLUNTARY SERVICE (VAVS) PROGRAM,  DAY'S LOCAL VETERANS ASSISTANCE PROGRAM (LVAP) OR BOTH. LAST YEAR, DAY DEDICATED \$75,000 TO  YOUTH VOLUNTEERS WHO DONATED THEIR TIME AND COMPASSION TO INJURED AND ILL VETERANS, SINCE  THE PROGRAM'S COMMENCEMENT, D AY HAS AWARDED 203 INDIVIDUAL SCHOLARSHIPS, VALUED AT  \$1,568,000, TO ENABLE THESE EXTRAORD INARY YOUNG PEOPLE TO PURSUE THEIR GOALS IN HIGHER  EDUCATION. LAST YEAR'S TOP HONOR OF \$20,000 WENT TO TANNER JOHNSON, OF CHEYENNE, WYOMING.  JOHNSON HAS BEEN A DAY VOLUNTEER SINCE 2018 AND HAS CONTRIBUTED 1.624 HOURS TO THE  CHEYENNE VA MEDICAL CENTER. THE PROGRAM EMPOWE RS AND INCENTIVIZES STUDENT VOLUNTEERS  TO GAIN LIFE AND JOB EXPERIENCE, STRIVE TO BE SUCCE SSFUL STUDENTS AND BECOME ACTIVE  COMMUNITY MEMBERS. VA VOLUNTARY SERVICE PROGRAM - THE VAV S PROGRAM PROVIDES AN  EXTENSIVE ARRAY OF SERVICES TO VETERANS IN VA HEALTH CARE FACILITIES THROUGHOUT OUR NATION.  DAY VOLUNTEERS PERFORM ESSENTIAL DUTIES, FROM BEING A COMPANION TO A VETERAN DURING DAYS  OF RECOVERY OR THERAPY TO DOING TASKS THAT REQUIRE HIGHLY TECHNICAL AND PROFESSIONAL  SKILLS. DAY, ALONG WITH THE AUXILLARY, TOTALED OVER 603,000 HOURS OF VOL UNTEERING IN 2020.  ACCORDING TO THE PAST VA FISCAL YEAR, THOSE HOURS COULD BE ACCUMULATED TO \$ 164, MILLION IN  COMPENSATION VALUE, SAVING TAXPAYERS FROM FOOTING THE BILL. THE VALUE OF THESE SERVICE  HOURS DON'T M

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS  SERVICE ACCOMPLISHMENTS  SERIOUS INJURY OR ILLNESS CANNOT BE COMPLETE UNTIL A VETERAN CAN FIND MEANING IN LIFE AND REGAIN A SENS E OF PURPOSE. FOR THOSE WHO ARE ABLE, WORKING TO CARE AND PROVIDE FOR THEMSELVES AND THEIR FAMILIES IS A KEY PART OF THAT JOURNEY. EACH YEAR, THOUSANDS OF MEN AND WOMEN MAKE THE TR ANSITION FROM MILITARY TO CIVILIAN LIFE. DAV REMAINS COMMITTED TO PROVIDING VALUABLE RESOU RCES TO ALL THOSE WHO HAVE SERVED, HELPING ENSURE THAT THESE VETERANS GAIN ACCESS TO THE TOOLS AND OPPORTUNITIES THEY NEED TO COMPETITIVELY ENTER THE JOB MARKET AND SECURE MEANINGF UL EMPLOYMENT. PARTNERING TO HELP VETERANS - WHETHER IT'S UNEMPLOYMENT OR UNDEREMPLOYMENT, DAV REALIZES THE CHALLENGES THAT MANY VETERANS FACE IN PURSUING REWARDING CAREERS. ESTABL ISHED IN 2014, THE DAV NATIONAL EMPLOYMENT PROGRAM HAS FIRMLY POSITIONED ITSELF AS THE LEA DER AMONG NONPROFITS PROVIDING ASSISTANCE TO TRANSITIONING MILITARY MEMBERS, VETERANS AND THEIR SPOUSES SEEKING NEW OR BETTER JOBS. A PRIMARY COMPONENT OF THIS MISSION IS OUR STRAT EGIC PARTNERSHIP WITH RECRUITMILITARY, A FULL-SERVICE, MILITARY-TO-CIVILIAN RECRUITING FIR M WHO HOSTS NATIONWIDE IN-PERSON AND VIRTUAL CAREER FAIRS THAT ARE ACCESSIBLE TO ALL WHO S ERVED AND THEIR SPOUSES. ADDITIONALLY, DAV USES A MULTITUDE OF ONLINE AND TRADITIONAL RESO URCES TO CONNECT EMPLOYERS, FRANCHISERS AND EDUCATIONAL INSTITUTIONS WITH ACTIVE-DUTY SERVICE MEMBERS, GUARD AND RESERVE PERSONNEL, VETERANS AND SPOUSES. IN JUST OVER SIX YEARS, DA V HAS UNQUESTIONABLY MADE A SIGNIFICANT IMPACT TO REDUCE THE NUMBER OF UNEMPLOYED AND UNDE REMPLOYED		<del> </del>
SOMETIMES, THE SHARED EXPÉRIENCES ARE ALL IT TAKES TO REMIND VETERANS THEY ARE NOT ALONE AND THAT THE RE IS A NEXT CHAPTER IN THEIR LIFE. DAV FULLY UNDERSTANDS THAT RECOVERY FROM SERIOUS INJUR YOR ILLNESS CANNOT BE COMPLETE UNTIL A VETERAN CAN FIND MEANING IN LIFE AND REGAIN A SENS E OF PURPOSE. FOR THOSE WHO ARE ABLE, WORKING TO CARE AND PROVIDE FOR THEMSELVES AND THEIR FAMILIES IS A KEY PART OF THAT JOURNEY. EACH YEAR, THOUSANDS OF MEN AND WOMEN MAKE THE TR ANSITION FROM MILITARY TO CIVILIAN LIFE. DAV REMAINS COMMITTED TO PROVIDING VALUABLE RESOU RCES TO ALL THOSE WHO HAVE SERVED, HELPING ENSURE THAT THESE VETERANS GAIN ACCESS TO THE T OOLS AND OPPORTUNITIES THEY NEED TO COMPETITIVELY ENTER THE JOB MARKET AND SECURE MEANINGF UL EMPLOYMENT, PARTNERING TO HELP VETERANS - WHETHER IT'S UNEMPLOYMENT OR UNDEREMPLOYMENT, DAV REALIZES THE CHALLENGES THAT MANY VETERANS FACE IN PURSUING REWARDING CAREERS. ESTABL ISHED IN 2014, THE DAV NATIONAL EMPLOYMENT PROGRAM HAS FIRMLY POSITIONED ITSELF AS THE LEA DER AMONG NONPROFITS PROVIDING ASSISTANCE TO TRANSITIONING MILITARY MEMBERS, VETERANS AND THEIR SPOUSES SEEKING NEW OR BETTER JOBS. A PRIMARY COMPONENT OF THIS MISSION IS OUR STRAT EGIC PARTNERSHIP WITH RECRUITMILITARY, A FULL-SERVICE, MILITARY-TO-CIVILIAN RECRUITING FIR M WHO HOSTS NATIONWIDE IN-PERSON AND VIRTUAL CAREER FAIRS THAT ARE ACCESSIBLE TO ALL WHO S ERVED AND THEIR SPOUSES. ADDITIONALLY, DAV USES A MULTITUDE OF ONLINE AND TRADITIONAL RESO URCES TO CONNECT EMPLOYERS, FRANCHISERS AND EDUCATIONAL INSTITUTIONS WITH ACTIVE-DUTY SERV ICE MEMBERS, GUARD AND RESERVE PERSONNEL, VETERANS AND SPOUSES. IN JUST OVER SIX YEARS, DA V HAS UNQUESTIONABLY MADE A SIGNIFICANT IMPACT TO REDUCE THE NUMBER OF UNEMPLOYED AND UNDE REMPLOYED	Return Reference	Explanation
PRESENT IN-PERSON AND VIRTUAL CAREER FAIRS NATIONWIDE THAT ENSURE VETERANS HAVE ACCESS TO THESE LIFE-CHANGING EMPLOYMENT OPPORTUNITIES. AS A NATION, WE ENDURED UNPRECEDENTED TI MES OVER THE PAST YEAR, BUT SERVICE-DISABLED VETERANS ESPECIALLY WERE AFFECTED BY THE COVID-19 PANDEMIC, CAUSING A DRAMATIC SPIKE IN UNEMPLOYMENT THAT CONTINUES TO BE A MAJOR CHALL ENGE FOR SO MANY. IN IMMEDIATE RESPONSE TO THE PANDEMIC CHANGING THE LANDSCAPE ON A DAILY BASIS, WE ARE PLEASED TO NOTE THAT IN MID-MARCH, WE WERE ABLE TO QUICKLY PIVOT OUR IN-PERS ON JOB FAIRS TO A FULL SCHEDULE OF VIRTUAL JOB FAIRS. IN DOING SO, THIS CREATED POSITIVE C	LINE 4C, PROGRAM SERVICE	SOMETIMES, THE SHARED EXPERIENCES ARE ALL IT TAKES TO REMIND VETERANS THEY ARE NOT ALONE AND THAT THE RE IS A NEXT CHAPTER IN THEIR LIFE. DAV FULLY UNDERSTANDS THAT RECOVERY FROM SERIOUS INJUR Y OR ILLNESS CANNOT BE COMPLETE UNTIL A VETERAN CAN FIND MEANING IN LIFE AND REGAIN A SENS E OF PURPOSE. FOR THOSE WHO ARE ABLE, WORKING TO CARE AND PROVIDE FOR THEMSELVES AND THEIR FAMILIES IS A KEY PART OF THAT JOURNEY. EACH YEAR, THOUSANDS OF MEN AND WOMEN MAKE THE TR ANSITION FROM MILITARY TO CIVILIAN LIFE. DAV REMAINS COMMITTED TO PROVIDING VALUABLE RESOU RCES TO ALL THOSE WHO HAVE SERVED, HELPING ENSURE THAT THESE VETERANS GAIN ACCESS TO THE T OOLS AND OPPORTUNITIES THEY NEED TO COMPETITIVELY ENTER THE JOB MARKET AND SECURE MEANINGF UL EMPLOYMENT. PARTNERING TO HELP VETERANS. WHETHER IT'S UNEMPLOYMENT OR UNDEREMPLOYMENT, DAV REALIZES THE CHALLENGES THAT MANY VETERANS FACE IN PURSUING REWARDING CAREERS. ESTABL ISHED IN 2014, THE DAV NATIONAL EMPLOYMENT PROGRAM HAS FIRMLY POSITIONED ITSELF AS THE LEA DER AMONG NONPROFITS PROVIDING ASSISTANCE TO TRANSITIONING MILITARY MEMBERS, VETERANS AND THEIR SPOUSES SEEKING NEW OR BETTER JOBS. A PRIMARY COMPONENT OF THIS MISSION IS OUR STRAT EGIC PARTNERSHIP WITH RECRUITMILITARY, A FULL-SERVICE, MILITARY-TO-CIVILIAN RECRUITING FIR M WHO HOSTS NATIONWIDE IN-PERSON AND VIRTUAL CAREER FAIRS THAT ARE ACCESSIBLE TO ALL WHO S ERVED AND THEIR SPOUSES. ADDITIONALLY, DAV USES A MULTITUDE OF ONLINE AND TRADITIONAL RESO URCES TO CONNECT EMPLOYERS, FRANCHISERS AND EDUCATIONAL INSTITUTIONS WITH ACTIVE-DUTY SERV ICE MEMBERS, GUARD AND RESERVE PERSONNEL, VETERANS AND SPOUSES. IN JUST OVER SIX YEARS, DAV HAS UNQUESTIONABLY MADE A SIGNIFICANT IMPACT TO REDUCE THE NUMBER OF UNEMPLOYED AND UNDE REMPLOYED VETERANS AND SPOUSES. IN JUST OVER SIX YEARS, DAV HAS UNQUESTIONABLY MADE A SIGNIFICANT IMPACT TO REDUCE THE NUMBER OF UNEMPLOYED AND UNDE REMPLOYED VETERANS HAVE ACCESS TO THESE LIFE-CHANGING EMPLOYMENT OPPORTUNITIES. AS A NATION, WE ENDURED UNPRECEDENTED TI MES OVER THE PAST YEAR, BUT SERVICE-DISAB

Return Reference	Explanation
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	0.00 CURRENT EMPLOYMENT OPPORTUNITIES AROUND THE WORLD AND DIRECT LINKS TO COMPANY WEBSITE JOB BOARDS. WE ARE VERY HAPPY TO REPORT THAT OUR CONSTANTLY EVOLVING EMPLOYMENT WEBSITE JOB BOARDS. WE ARE VERY HAPPY TO REPORT THAT OUR CONSTANTLY EVOLVING EMPLOYMENT WEBSITE C ONTINUES TO GROW A MULTITUDE OF EMPLOYMENT, ENTREPRENEURIAL AND EDUCATIONAL CONTENT AND RE SOURCES AVAILABLE TO THE THOUSANDS WHO ACCESS IT MONTHLY. THROUGH EFFORTS STARTED IN 2017, WE HAVE EXPANDED OUR ASSISTANCE THROUGH THE CREATION OF THE VETERAN ADVANTAGE: DAV GUIDE TO HIRING & RETAINING VETERANS WITH DISABILITIES. THROUGH INTERACTION WITH HUNDREDS OF COM PANIES, RECURRING QUESTIONS ABOUT BEST PRACTICES AND STRATEGIES WHEN HIRING VETERANS WITH DISABILITIES HAVE BECOME MORE AND MORE COMMON. DAV INITIALLY RELEASED THE GUIDE IN 2018, B UT DUE TO SOME UPDATES AND THE GUIDE'S IMPORTANCE, IT WAS RE-RELEASED IN OCTOBER 2019 AND HAD NEARLY 60,000 VIEWS OF THE FREE DIGITAL VERSION IN THE FIRST TWO MONTHS ALONE. WITH OUR HIRING GUIDE AND DIRECT ENGAGEMENT, DAV CONTINUES TO PROVIDE COMPANIES, HIRING MANAGERS OR OTHER HUMAN RESOURCES PROFESSIONALS A SOLUTION-ORIENTED PRACTICAL AND STRATEGIC APPROACH TO HIRING AND RETAINING VETERANS WITH DISABILITIES. IN ADDITION TO HELPING VETERANS AND THEIR SPOUSES SECURE MEANINGFUL EMPLOYMENT, DAV CONTINUED ADVANCING OUR EFFORT TO PROVIDE SUPPORT AND ASSISTANCE TO SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESSES THROUGH OUR CONT INUED INVOLVEMENT WITH PROGRAMS LIKE THE INSTITUTE OF VETERANS & MILITARY FAMILIES OR PATR IOT BOOTCAMP (PBC). IN FACT, IN OCTOBER 2020, DAV PARTNERED WITH PBC TO CO-HOST A VIRTUAL VETERAN AND MILITARY SPOUSE ENTREPRENEURSHIP EVENT WITH PBC TO CO-HOST A VIRTUAL VETERAN AND MILITARY SPOUSE ENTREPRENEURSHIP EVENT WITH PBC TO CO-HOST A VIRTUAL VETERAN AND MILITARY SPOUSE ENTREPRENEURSHIP EVENT WITH PBC TO CO-HOST A VIRTUAL VETERAN AND MILITARY SPOUSE ENTREPRENEURSHIP EVENT WITH PBC TO CO-HOST A VIRTUAL VETERAN AND MILITARY SPOUSE ENTREPRENEURSHIP EVENT WITH THE PROGRAMS DEDICATED SOLELY TO HELPING V

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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES	COMMUNICATIONS PROGRAM: DAV's National Communications Department runs internal and externa I communications programs-including, but not limited to, publications, media relations, di gital material and numerous outreach efforts-to tell DAV's story and support its key object tives. A bimonthly magazine informs our members on critical issues and policies impacting the federal benefits and services veterans have earned through their service. It also brin gs attention to DAV's state-level departments and our local chapters by highlighting their many successful service programs and, therefore, inspiring strong and effective strategie s in communities from coast to coast. By producing public service announcements, news rele ases, brochures, speeches, op-eds, print messages, educational videos and other content, D AV is able to spread information about our organization and the complete scope of free ser vices that help create more victories for veterans. Furthermore, DAV has continued to grow its social media presence through Facebook, Twitter, LinkedIn and Instagram. On Facebook, DAV provides daily information to more than 1.4 million followers, and in 2020, DAV's pos ts received more than 136,000 impressions each day. On Twitter, DAV has more than 100,000 followers and DAV's content on Twitter achieved a 16% increase in click-through rate versu s 2019. Also, DAV tweets were seen by more than 5.6 million individuals, an increase of 20% over the year prior. Engagement on Twitter was also up by 41% compared to 2019. DAV's In stagram profile surpassed the 53,000-follower threshold, representing a 23% increase from 2019. DAV's LinkedIn presence, our following grew to over 96,000 us ers, which highlights an astounding 75% increase from 2019. DAV content surpassed 3 millio n impressions on LinkedIn, marking an 82% increase over 2019. To ensure America's fallen v eterans and service members were not forgotten on Memorial Day in the wake of COVID-19, the DAV Honor Wall Mosaic was launched digitally to bring together the milit

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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES	ted more than 3.3 million times and received nearly 6.5 million page views. DAV is always looking for new and exciting partnerships to help us reach more veterans and their familie s. In 2020, DAV maintained a consistent presence online through digital placements and edi torial content across top-tier publishers such as YouTube, USA Today, Hearst, Military, com and Military Times. An ABC partnership continued for its fifth consecutive year and inclu ded significant exposure for DAV through an integrated TV, radio, online and social media program. The relationship with ESPN and the Ultimate Fighting Championship continued for the second year, including custom video content, special DAV shoutouts and recognition during two broadcast payper-view events and social media promotion around DAV's centennial and Veterans Day. All in all, the digital and national media campaigns generated over 692 million impressions and 15 million video views. DAV's centennial was a momentous occasion that was marked in part with an hour long documentary, "The Battle Never Ends." The film is narrated by Marine Corps legend Dale Dye and highlights the origins of DAV and its accompl ishments throughout the past century. Through a partnership with the HISTORY Channel, the documentary premiered around the Veterans Day time frame and included additional airings a cross the Military HISTORY Channel. The partnership included broadcast and online promotion, social and earned media support, as well as a continued on-demand placement through Apr il 2021. The full-length documentary can also be found on DAV's official website at dav.or g/learn-more/media. The partnership has resulted in over 10 million impressions and nearly 130,000 video views. With such an immense collection of programs and services, DAV is able to provide detailed research and resources to best explain issues with facts, applicable examples and important context. As a result, our educational public service and outreach programs continue to promote awareness of veterans' issues

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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES	ntinues to change, and DAV embraces those changes to ensure veterans of all service eras a nd genders are able to have their chance at the American dream. Today, social networking a nd other changes to the ways Americans communicate allow DAV members to play a larger role than ever as spokespeople advocating for the unique needs of the veteran community. We con tinue to respond to the needs of the current generation of veterans and are also steadfast in our resolution to ensure equitable support for another vital part of our community-ve teran caregivers. These unsung heroes provide unfaltering dedication to disabled veterans, often assuming a life of heavy responsibility and sacrifice to care for their loved ones affected by devastating illness or injury. DAV has over 4,500 dedicated to recruiting vete rans so that we can maintain our strong voice and credibility with lawmakers now and well into the future. With 52 state-level departments and more than 1,200 chapters nationwide, we closed the 2019-2020 membership year with more than 1 million veterans in DAV, ensuring a strong, unified and living embodiment of DAV's mission of service to veterans, their fa milies and survivors. Expenses \$5,244,617 including grants of \$0. Revenue \$0. LEGISLATIVE PROGRAM: From its inception, DAV has been a leader in the development and strengthening of federal programs, benefits, health care and transition services for the men and women who served, their families and survivors. Our advocacy efforts are guided by DAV members through the adoption of legislative and policy resolutions at our national convention. With the strength of more than 1 million members, DAV is able to routinely influence and improve federal laws approved by Congress and federal regulations and policies of the Department of Veterans Affairs and other federal agencies affecting ill and injured veterans. In 2020, DAV again played a major role in the development, approval and implementation of federal legislation to strengthen programs that support ill and inju

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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES (CONT)	PUBLIC AWARENESS OUTREACH: When our heroes return home from military service, many struggl e to regain a sense of normalcy. They must start the long and often difficult process of h ealing and rehabilitation so that they can begin to rebuild the lives they once knew. They must find jobs and often housing, as well as relearn how to relate to their families after having been away for long periods of time. Accessing basic health services can be daunting. That's why DAV is here to help them every step of the way. Too many of our wounded, il I and injured veterans haven't accessed the benefits and services they've earned. Most sim ply aren't aware of their rights and benefits or the free help our National Service Program can provide with filing for benefits from the Department of Veterans Affairs and other g overnment agencies. Neither are they aware of the wide range of other programs we offer to wounded, ill and injured veterans and their families. This program supplements the outrea ch efforts already built into our other program services. It offers the American public an even greater opportunity to become personally involved in identifying and assisting the men and women who have served our nation. In 2020, \$23.9 million was spent on this large-sc ale outreach effort-an investment that's making a real difference in the lives of veterans and their families. Expenses \$23,856,630 including grants of \$0. Revenue \$40,259. Public Service Announcement Program: In 2020, DAV's mission of service to all veterans was front and center in our national and local placements, thanks to our public service announcement campaign. Television, print, radio and out-of-home messages helped raise awareness of the programs and free services we provide to veterans and their families. These timely and in spiring messages also raised public awareness of DAV and the service, sacrifices and needs of those we serve. In the increasingly busy and competitive ad spaces of network radio, t elevision and other media, DAV stood tall during a time w

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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES (CONT)	itary and civilian populations continues to widen, these messages help to serve as testame nts to an American public too often unaware of the sacrifices of men and women in uniform To view or download DAV's public service messages, visit daypsa.org. Expenses \$926,751 inc luding grants of \$0. Revenue \$0. ReLIEF ASSISTANCE AND PROGRAM GRANTS: VETERANS DISABLED I N WARTIME SERVICE ARE PARTICULARLY VULNERABLE WHEN A CATASTROPHE STRIKES. DAV OPERATES AN EFFECTIVE PROGRAM THAT DELIVERS DIRECT GRANTS TO HELP VETERANS AND THEIR FAMILIES IN TIMES OF NEED, AS WELL AS RESOURCES TO FUND STATE-LEVEL SERVICES. OUR DISASTER RELIEF PROGRAM P ROVIDES GRANTS IN THE AFTERMATH OF NATURAL DISASTERS AND EMERGENCIES IN VARIOUS AREAS AROU ND THE NATION TO HELP VETERANS AND THEIR FAMILIES SECURE TEMPORARY LODGING, FOOD AND OTHER NECESSITIES. DURING 2020, DAV PROVIDED \$901,000 TO MORE THAN 1,200 VETERANS AFFECTED BY N ATURAL DISASTERS, INCLUDING HURRICANES, TORNADOS, FLOODS AND FIRES IN ALABAMA, ARKANSAS, C ALIFORNIA, FLORIDA, MICHIGAN, MINNESOTA, MISSISSIPPI, NORTH CAROLINA, OHIO, OKL AHOMA, OREGON, PUERTO RICO, TENNESSEE, TEXAS AND VIRGINIA. AS THE COMMERCE OF OUR NATION G RINDED TO A HALT AMID THE CORONAVIRUS PANDEMIC, MANY DISABLED VETERANS WERE FINDING THEMSE LVES SUDDENLY UNEMPLOYED AND UNABLE TO PROVIDE FOR THEMSELVES AND THEIR FAMILIES. FOR OUR NATION'S 4.7 MILLION DISABLED VETERANS, THE CORONAVIRUS CREATED A UNIQUE SET OF CHALLENGES -NOT ONLY DID SERVICE-CONNECTED ILLNESSES PLACE THESE INDIVIDUALS IN A HIGHER RISK CATEGORY, BUT MANY ALSO FACED A DIRE FINANCIAL SITUATION DUE TO LOST INCOME. WHILE THE DISASTER R ELIEF PROGRAM NORMALLY OPERATES IN REACTION TO NATURAL DISASTERS, COVID-19 DEMANDED A PROA CTIVE EXPANSION ONCE THE SCALE OF ITS EFFECTS WAS RECOGNIZED. THOUSANDS OF DISABLED VETERANS WERE IN NEED, AND DAY STEPPED IN TO HELP BY ESTABLISHING THE COVID-19 UNEMPLOYMENT OR INCOME IN THE WAKE OF THE VIRUS'S OUT SERVIC E-CONNECTED DISABLED VETERANS WHO LOST EMPLOYMENT OR INCOME IN THE WAKE OF THE VIRUS'S OUT BREAK. IN 2020, ALM

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Reference

FORM 990,	MEMBERS OR STOCKHOLDERS DAV IS A NOT-FOR-PROFIT ORGANIZATION WITH MEMBERS THAT HAVE THE RIGHT
PART VI,	TO PARTICIPATE IN THE ORGANIZATION'S GOVERNANCE. THEY, OR THEIR DELEGATES, ELECT FOUR MEMBERS OF
SECTION A,	DAV'S BOARD OF DIRECTORS.
LINE 6	

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LINE 7A

FORM 990, ORGANIZATION MEMBERS PLEASE SEE FORM 990, PART VI, SECTION A, LINE 6.
PART VI, SECTION A.

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Reference	Explanation
PART VI, SECTION B,	PROCESS OF THE REVIEW OF FORM 990 FOLLOWING COMPLETION OF FORM 990 BY DAV'S TAX PREPARER, IT IS REVIEWED BY DAV'S ACCOUNTING DEPARTMENT STAFF AND EXECUTIVE DIRECTOR. ONCE RESULTING REVISIONS ARE MADE, THE FORM IS MAILED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW AND QUESTIONS. IT IS SUBSEQUENTLY FILED WITH THE IRS.

Explanation

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Reference	'
FORM 990,	ORGANIZATION'S PRACTICE FOR MONITORING COMPLIANCE ALL MEMBERS OF THE BOARD OF DIRECTORS RECEIVE
PART VI,	A COPY OF THE CONFLICT OF INTEREST POLICY IMMEDIATELY UPON ASSUMING OFFICE, OR AT A MINIMUM,
SECTION B,	ANNUALLY. THE SAME PROCESS APPLIES TO KEY EMPLOYEES AND DEPARTMENT DIRECTORS. RECIPIENTS
LINE 12C	ACKNOWLEDGE THEY HAVE READ THE POLICY, IDENTIFY ANY AREAS OF CONFLICT AND RETURN THE SIGNED
	DISCLOSURE FORM TO THE DAV EXECUTIVE DIRECTOR, RESPONSES ARE REVIEWED AND IDENTIFIED. CONFLICTS

ARE REFERRED TO THE BOARD OF DIRECTORS FOR DISCUSSION AND APPROVAL AS APPROPRIATE.

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Reference	·
PART VI, SECTION B, LINE 15	COMPENSATION REVIEW PROCESS EVERY FOUR OR FIVE YEARS DAV HIRES AN INDEPENDENT CONSULTING FIRM TO REVIEW COMPENSATION OF DAV NATIONAL ADJUTANT AND CEO, EXECUTIVE DIRECTORS, KEY EMPLOYEES, AND OTHER TOP MANAGEMENT OFFICIALS. IN 2018, THE CONSULTING FIRM WAS BUCK CONSULTING. THIS INVOLVES REVIEW OF POSITION RESPONSIBILITIES, ACCUMULATION OF COMPARABLE DATA FROM OTHER ORGANIZATIONS AND DETERMINATION OF APPROPRIATE COMPENSATION RANGES FOR EACH. THE RANGES ARE REVIEWED AND APPROVED BY INDEPENDENT MEMEMBERS OF THE BOARD OF DIRECTORS (BOARD). ANY SUBSEQUENT CHANGES IN COMPENSATION, TYPICALLY ANNUAL AND WITHIN THE ESTABLISHED RANGES, ARE ALSO APPROVED BY THE BOARD. NON-EMPLOYEE MEMBERS OF DAV'S BOARD RECEIVE AN IRS APPROVED DAILY PER DIEM WHEN ATTENDING MEETINGS OR REPRESENTING DAV AT VARIOUS RELATED EVENTS. THIS IS PRIMARILY TO COVER MEALS AND LODGING.

Explanation

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REQUEST.

Reference

LINE 19

FORM 990, DOCUMENTS GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.
PART VI, THE DAV ANNUAL REPORT AND MOST RECENT FORM 990 ARE AVAILABLE ON DAV'S WEBSITE (WWW.DAV.ORG) AND SECTION C. ALSO UPON REQUEST OR PUBLIC INSPECTION AT DAV NATIONAL HEADQUARTERS. FORM 1024 IS AVAILABLE UPON