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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047
		2010
		Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010		
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization Disabled American Veterans	D Employer identification number 31-0263158
	Doing Business As	E Telephone number (859) 441-7300
	Number and street (or P O box if mail is not delivered to street address) 3725 Alexandria Pike	Room/suite
	G Gross receipts \$ 413,432,593	
	City or town, state or country, and ZIP + 4 Cold Spring, KY 41076	
	F Name and address of principal officer J Marc Burgess 3725 Alexandria Pike Cold Spring, KY 41076	H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶ 0557
I Tax-exempt status ☐ 501(c)(3) ☒ 501(c) (4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527		
J Website: ▶ www.dav.org		
K Form of organization ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶		L Year of formation 1932
M State of legal domicile		

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities Since 1920, DAV builds better lives for America's disabled veterans and their families																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td>3 Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>7</td></tr><tr><td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>6</td></tr><tr><td>5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)</td><td>5</td><td>695</td></tr><tr><td>6 Total number of volunteers (estimate if necessary)</td><td>6</td><td>10,000</td></tr><tr><td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>0</td></tr><tr><td>b Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td>0</td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	7	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	6	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	695	6 Total number of volunteers (estimate if necessary)	6	10,000	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	b Net unrelated business taxable income from Form 990-T, line 34	7b	0						
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Part II	Signature Block
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer		2011-07-11			
			Date			
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature	Date	Check if self-employed ☐	PTIN
	Firm's name ▶ Deloitte Tax LLP					Firm's EIN ▶
	Firm's address ▶ 250 East Fifth Street Suite 1900 Cincinnati, OH 45202					Phone no ▶ (513) 784-7100

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

☒

1

Briefly describe the organization’s mission

Made up exclusively of men and women disabled in our nation’s defense, the Disabled American Veterans is dedicated to one, single purpose building better lives for all of our nation's disabled veterans and their families -Provide free, professional assistance to veterans & their families to obtain benefits & services earned through military service and provided by the Dept of Veterans Affairs and other agencies, - Provide outreach concerning its program services to the American people, and to disabled veterans and their families, -Represent the interests of disabled veterans, their families, widowed spouses and orphans before Congress, the White House, the Judicial Branch, and state and local govt, -Extend the DAV's mission of hope into communities where these veterans and their families live through a network of state-level Depts and local chapters,-Provide a structure through which disabled veterans express their compassion for fellow veterans through volunteer programs

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes

☒ No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes

☒ No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 49,395,035 including grants of \$ 7,753,876) (Revenue \$)

NATIONAL SERVICE PROGRAM In 110 offices throughout the United States and in Puerto Rico, the DAV employs a corps of approximately 260 National Service Officers (NSO's) and 31 Transition Service Officers (TSO's) who directly and tirelessly represent veterans and their families with claims for benefits from the Department of Veterans Affairs, the Department of Defense and other government agencies Veterans need not be DAV members to take advantage of this outstanding assistance, which is provided free of charge Between January 1, 2010, and December 31, 2010, our NSO's and TSO's, all wartime service-connected disabled veterans, represented nearly a quarter of a million veterans and their families in their claims for VA benefits, obtaining more than \$4 5 billion for them in new and retroactive benefits DAV's highly skilled National Appeals Officers (NAO's) provide an invaluable service to appellants in the preparation of informal hearing presentations and by conducting formal hearings for Board of Veterans' Appeals (BVA) review The DAV maintains the largest staff of any advocacy group Transition Service Officers (TSO's) provide benefits counseling and assistance to service members filing initial claims for VA benefits at more than 100 military installations throughout the nation By filing compensation claims at separation centers where service medical records and examination facilities are readily available, DAV is able to provide better, more prompt service to these future veterans During 2010, TSO's conducted over 2,759 formal presentations to approximately 82,155 transitioning service members During that same time, our TSO's filed over 26,598 claims for veterans' benefits By literally putting our service offices on the road, assisting veterans where they live, DAV is increasing their accessibility to benefits The DAV currently has 10 specially equipped Mobile Service Offices (MSO's) to visit communities across the country During 2010, our MSO's traveled more than 114,000 miles while visiting 815 cities and towns NSO's interviewed 20,190 veterans and other potential claimants The NSO's also participate in other outreach efforts such as Veterans Information Seminars, Homeless Veteran Initiatives, Employment Programs and Women Veterans Outreach Programs VOLUNTARY SERVICE PROGRAM The DAV also operates an extensive network of programs through which volunteers provide a variety of services to disabled veterans Since 1987, 2,368 vans have been purchased by the DAV National Organization, Chapters, Departments, and the DAV National Service Foundation Columbia Trust These vans have all been donated to VA hospitals for use in the Transportation Network During 2010, Transportation Network Volunteers contributed 1,883,007 hours of service, valued at \$39,260,696 and drove 25,509,350 miles, providing 673,474 free rides to veterans The value of these contributed services is reported as revenue on DAV's financial statements prepared in accordance with Generally Accepted Accounting Principles, but is not recorded as revenue on this Form 990 in accordance with Internal Revenue Service guidelines In addition to those hours donated under the Transportation Network during 2010, DAV volunteers contributed another 313,054 hours of service to veterans, volunteering at VA hospitals, clinics, and nursing homes through the VA Voluntary Service (VAVS) program STATE SERVICE AND DISASTER RELIEF PROGRAMS The DAV conducts a program under which direct grants are provided to needy disabled veterans and their families, as well as a program to fund state level services to these veterans and families The DAV is there when disasters strike to offer aid and assistance to our members and all affected veterans DAV National Service Officers are dispatched to the disaster area to provide monetary assistance, conduct benefit counseling, and to offer referral sources We provided disaster relief grants in the aftermath of natural disasters and emergencies in various areas around the nation During 2010, grants totaling \$1,250 were disbursed to help disabled veterans secure temporary lodging, food, and other necessities Since the program's inception in 1968, \$8,762,831 has been disbursed The DAV conducts a program to help fund services that state level Departments provide to disabled veterans and their families In some cases, these Department programs extend, supplement, or dovetail services the DAV provides in these states through its nationwide programs In other cases, Departments have created entirely new programs to meet the unique needs of veterans in their states Grants to Departments under this program totaled \$3,779,001 in 2010 This program carries the DAV's self-help concept forward in a unique way, in that it is funded exclusively with donations made by disabled veterans who are members of the DAV, not with contributions from the general public

4b

(Code) (Expenses \$ 5,697,336 including grants of \$) (Revenue \$)

PUBLICATIONS & COMMUNICATIONS A well-informed membership is essential to the DAV's strength As a membership organization, the DAV publishes a full-color magazine to keep our members informed about important issues and our government's policies affecting the federal benefits and services they've earned The DAV produces a variety of print advertisements, brochures, and other informational products to advise all disabled veterans and their families of the organization's free services, as well as opportunities to assist others through our volunteer programs The DAV also maintains a comprehensive Internet website (www.dav.org), which serves as a vital informational and education resource for disabled veterans and the general public As part of our comprehensive public outreach program, the DAV also produces and distributes television and radio public service announcements, or PSAs, increasing public awareness and understanding of the needs of disabled veterans and other handicapped people

4c

(Code) (Expenses \$ 9,016,206 including grants of \$) (Revenue \$ 5,386,896)

MEMBERSHIP PROGRAM The DAV provides a variety of services in its efforts to build the large, strong, and active membership base required to effectively promote a positive agenda for the well-being of America's disabled veterans and their families In accomplishing this, the organization coordinates and extends its mission of hope into communities where veterans and their families live A structure of 52 state Departments and more than 1,499 local Chapters nationwide supports our mission Funds raised from the general public are not used to pay for membership services

4d

Other program services (Describe in Schedule O) See also Additional Data for Description

(Expenses \$ 22,763,911 including grants of \$) (Revenue \$)

4e

Total program service expenses

\$ 86,872,488

Part IV

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 instruction)? 	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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	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 where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	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? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21, 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 	9	No
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a 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. 	11b	No
c 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. 	11c	No
d 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
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	Yes
f 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	Yes
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a	Yes
b 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, XII, and XIII 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, and program service activities outside the United States? 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 assistance to any organization or entity located outside the U S ? 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 assistance to individuals located outside the U S ? 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," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ☐ Yes ☒ No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance				
Check if Schedule O contains a response to any question in this Part V ☐				
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	122	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	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.	2a	695	
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		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b		
4a	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)?	4a		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a	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
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Yes
c	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.	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
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	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter				
a	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				
a	Gross income from members or shareholders.	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
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.	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	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.	13b		
c	Enter the amount of reserves on hand.	13c		
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		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section 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	1a7		
b	Enter the number of voting members included in line 1a, above, who are independent	1b6		
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	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	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

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does 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?			
a	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," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK, AZ, AR, CT, FL, GA, HI, KS, ME, MD, MN, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI, TN, TX, UT, VA, WA, WV
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☒ Own website ☐ Another's website ☒ Upon request	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	Marc Burgess 3725 Alexandria Pike Cold Spring, KY 41076 (859) 441-7300

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question 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, and **current** key employees. 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, and 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Raymond E Dempsey Chairman (1/10-8/10)	5.00	X						4,670	0	0
(2) Robert Barrera Chairman (8/10-12/10)	5.00	X						89,096	0	0
(3) Wallace Tyson Vice-Chairman (1/10-8/10)	5.00	X						96,240	0	0
(4) Donald Samuels Vice-Chairman (8/10-12/10)	5.00	X						11,961	0	0
(5) Robert DiGirolamo Treasurer (1/10-8/10)	5.00	X						7,890	0	0
(6) Rodney Tucker Treasurer (8/10-12/10)	5.00	X						7,964	0	0
(7) Delphine Metcalf-Foster Director	5.00	X						2,669	0	0
(8) Jay E Johnson Director	5.00	X						2,364	0	0
(9) Davis Lorren Director	5.00	X						10,356	0	0
(10) Arthur Wilson Natl Adjutant/CEO/Sec	40.00	X		X				279,125	0	65,952
(11) Richard E Patterson Exec Dir Natl HQ (1/10-7/10)	40.00			X				182,373	0	8,947
(12) J Marc Burgess Exc Dir Natl HQ (7/10-12/10)	40.00			X				145,212	0	74,071
(13) David Gorman Exec Director NSLHQ	40.00				X			233,911	0	43,141
(14) Christopher Clay General Counsel	40.00					X		189,520	0	116,994
(15) Anita Blum Comptroller	40.00					X		164,902	0	77,514
(16) Jeffery Hall Asst Natl Legislatv Dir	40.00					X		189,605	0	29,862

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(17) Garry Augustine Natl Service Director	40 00					X		161,663	0	81,892
(18) Edward Reese Deputy Director HR	40 00					X		151,228	0	63,651
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,930,749	0	562,024

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 26

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Kelly Services Inc PO Box 530437 Atlanta, GA 303530437	Temporary Services	663,245
AirSupport LLC 4490 West Lake Rd Canandagua, NY 14424	Consulting	425,200
Adecco Employment Services PO Box 371084 Pittsburgh, PA 152507084	Temporary Services	376,431
Creative Direct Response 16900 Science Drive Bowie, MD 20715	Consulting	317,774
Buck Consultants LLC Dept Ch 14061 Palatine, IL 600554061	Consulting	210,714
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 12		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a						
	b Membership dues 1b						
	c Fundraising events 1c						
	d Related organizations 1d						
	e Government grants (contributions) 1e						
	f All other contributions, gifts, grants, and similar amounts not included above 1f			108,797,382			
	g Noncash contributions included in lines 1a-1f \$			332,106			
	h Total. Add lines 1a-1f			108,797,382			
	Program Service Revenue				Business Code		
2a Membership Dues			900099	5,386,896	5,386,896		
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f				5,386,896			
Other Revenue		3 Investment income (including dividends, interest and other similar amounts)				7,831,129	
	4 Income from investment of tax-exempt bond proceeds . .						
	5 Royalties				744,777		744,777
				(i) Real	(ii) Personal		
	6a Gross Rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
				(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory				290,633,634		
	b Less cost or other basis and sales expenses				288,672,620		
	c Gain or (loss)				1,961,014		
	d Net gain or (loss)				1,961,014		1,961,014
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a						
	b Less direct expenses b						
	c Net income or (loss) from fundraising events . .						
	9a Gross income from gaming activities See Part IV, line 19 . a						
	b Less direct expenses b						
	c Net income or (loss) from gaming activities . .						
	10a Gross sales of inventory, less returns and allowances . a						
b Less cost of goods sold b							
c Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue			Business Code				
11a Other Revenue			900099	38,775			38,775
b							
c							
d All other revenue							
e Total. Add lines 11a-11d				38,775			
12 Total revenue. See Instructions				124,759,973	5,386,896	0	10,575,695

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	7,632,917	7,632,917		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	120,959	120,959		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,177,344	786,740	390,604	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	125,510	49,994	75,516	
7	Other salaries and wages	28,554,561	24,319,428	2,000,222	2,234,911
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,738,701	6,229,914	533,783	975,004
9	Other employee benefits	10,914,933	9,200,097	727,049	987,787
10	Payroll taxes	2,368,899	2,014,042	166,917	187,940
a	Fees for services (non-employees) Management				
b	Legal	185,312	47,519	136,868	925
c	Accounting	231,800		231,800	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	168,000			168,000
f	Investment management fees	165,995		165,995	
g	Other	2,906,208	1,919,034	515,433	471,741
12	Advertising and promotion	215,379	195,641	115	19,623
13	Office expenses	48,978,666	23,127,560	421,015	25,430,091
14	Information technology	483,865	447,597	28,775	7,493
15	Royalties	2,035,663	821,395		1,214,268
16	Occupancy	775,560	456,709		318,851
17	Travel	1,332,143	1,305,285	10,195	16,663
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,345,776	1,345,776		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,839,151	1,058,892	291,884	488,375
23	Insurance	286,783	194,934	74,122	17,727
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	Membership Services	4,000,000	4,000,000	0	0
b	Relocation	1,222,546	1,198,280	24,266	0
c	Other Expenses	522,852	248,432	272,972	1,448
d	Project Costs	122,817	86,997	0	35,820
e	Training	104,454	64,346	35,789	4,319
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	125,556,794	86,872,488	6,103,320	32,580,986
26	Joint costs. Check here ☒ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	46,811,345	21,065,105	0	25,746,240

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			6,463,577	2	6,320,849
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			2,130,928	4	1,145,674
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			1,995,193	8	1,438,917
	9	Prepaid expenses and deferred charges			3,464,579	9	3,211,372
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	35,309,695			
	b	Less: accumulated depreciation	10b	27,780,007	8,075,081	10c	7,529,688
	11	Investments—publicly traded securities			340,758,726	11	373,234,498
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			257,500	15	482,400
16	Total assets. Add lines 1 through 15 (must equal line 34)			363,145,584	16	393,363,398	
Liabilities	17	Accounts payable and accrued expenses			18,227,028	17	20,532,464
	18	Grants payable				18	
	19	Deferred revenue			4,786,117	19	3,783,621
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			101,153,278	25	109,587,612
	26	Total liabilities. Add lines 17 through 25			124,166,423	26	133,903,697
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			238,979,161	27	259,459,701
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			238,979,161	33	259,459,701
34	Total liabilities and net assets/fund balances			363,145,584	34	393,363,398	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	124,759,973
2	Total expenses (must equal Part IX, column (A), line 25)	2	125,556,794
3	Revenue less expenses Subtract line 2 from line 1	3	-796,821
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	238,979,161
5	Other changes in net assets or fund balances (explain in Schedule O)	5	21,277,361
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	259,459,701

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☐

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE D
(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization Disabled American Veterans	Employer identification number 31-0263158
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐

☐

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

☐

☐

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		467,464		467,464
b Buildings		7,005,995	5,009,038	1,996,957
c Leasehold improvements		4,034,753	2,497,961	1,536,792
d Equipment		23,374,516	20,273,008	3,101,508
e Other		426,967		426,967
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				7,529,688

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	124,759,973
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	125,556,794
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-796,821
4	Net unrealized gains (losses) on investments	4	18,559,125
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	2,718,236
9	Total adjustments (net) Add lines 4 - 8	9	21,277,361
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	20,480,540

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	165,668,162
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	41,074,184
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	41,074,184
3	Subtract line 2e from line 1	3	124,593,978
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	165,995
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	165,995
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	124,759,973

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	166,464,983
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	41,074,184
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	41,074,184
3	Subtract line 2e from line 1	3	125,390,799
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	165,995
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	165,995
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	125,556,794

Part XIV

Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Description of Uncertain Tax Positions Under FIN 48	Part X	ASC Topic 740, Income Taxes, clarifies the accounting for uncertainty in income taxes by prescribing the recognition threshold a tax position is required to meet before being recognized in the financial statements. It also provides guidance on derecognition, classification, interest and penalties, accounting in interim periods, disclosure, and transition. DAV applies ASC Topic 740 and notes no effect on its financial statements.
Part XI, Line 8 - Other Adjustments		Adjustment to Minimum Pension Liability & Effect of Provisions of ASC 715

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Disabled American Veterans

Employer identification number
31-0263158

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and e-mail solicitations

f

☐

Solicitation of government grants

c

☐

Phone solicitations

g

☐

Special fundraising events

d

☒

In-person solicitations

2a

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

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Creative Direct Response 16900 Science Drive Suite 210 Bowie, MD 20715	Direct Mail & Electronic Fundraising		No	7,860,500	280,000	7,580,500
Total ▶				7,860,500	280,000	7,580,500

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

AK, AR, AZ, CA, CO, CT, FL, GA, HI, IL, IN, KS, KY, ME, MD, MA, MN, MS, MO, NC, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	
	1	Gross receipts			
	2	Less Charitable contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			

Part III Gaming.

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16 Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
Disabled American Veterans

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Employer identification number
31-0263158

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations

7

3

Enter total number of other organizations

55

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Scholarships	29	70,625			
(2) Walter Reed Army Medical Center	500		49,084	Book	Shirts, Shorts, Backpacks, Calling Cards, Nintendo DS Games, Food

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 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 DAV to monitor the proper use of funds granted by DAV 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

Software ID:

Software Version:

EIN: 31-0263158

Name: Disabled American Veterans

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
DAV Department of Alabama 7538 Misty Lane Pinson,AL 351262463	63-0421186	501(c)(4)	70,139				Veteran Services
DAV Department of Arizona 38 West Dunlap Avenue Phoenix,AZ 85021	86-0191627	501(c)(4)	78,159				Veteran Services
DAV Department of Arkansas PO Box 1620 North Little Rock,AR 72115	38-6143144	501(c)(4)	51,341				Veteran Services
DAV Department of California 13733 East Rosecrans Avenue Santa Fe Springs,CA 90670	95-0684372	501(c)(4)	883,274				Veteran Services
DAV Department of Colorado 1485 Holland Street Lakewood,CO 802154735	84-0388439	501(c)(4)	94,748				Veteran Services
DAV Department of Connecticut 35 Cold Spring Road Suite 315 Rocky Hill,CT 06067	06-6050968	501(c)(4)	35,006				Veteran Services
DAV Department of Delaware PO Box 407 Camden,DE 19934	23-7169083	501(c)(4)	9,511				Veteran Services
DAV Department of DC PO Box 43584 Washington,DC 20010	31-1017322	501(c)(4)	8,560				Veteran Services
DAV Department of Florida 2015 SW 75th Street Gainesville,FL 32607	59-0915376	501(c)(4)	249,517				Veteran Services
DAV Department of Georgia 4462 Houston Avenue Macon,GA 31206	58-6043522	501(c)(4)	85,036				Veteran Services
DAV Department of Idaho 6540 Oreana Avenue Boise,ID 837092955	82-6013538	501(c)(4)	20,464				Veteran Services
DAV Department of Illinois 809 South Grand Avenue West Springfield,IL 62704	36-2026733	501(c)(4)	81,189				Veteran Services

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
DAV Department of Indiana 2439 West 16th Street Indianapolis,IN 46222	35-0269110	501(c)(4)	65,699				Veteran Services
DAV Department of IowaPO Box 96 Lansing,IA 521510096	42-0218615	501(c)(4)	29,686				Veteran Services
DAV Department of Kansas 1769 Locust Road Fort Scott,KS 667018336	48-0669371	501(c)(4)	29,899				Veteran Services
DAV Department of Kentucky PO Box 129 Shepherdsville,KY 40165	61-0574614	501(c)(4)	78,966				Veteran Services
DAV Department of Louisiana PO Box 1271 Baton Rouge,LA 70821	72-6023897	501(c)(4)	41,322				Veteran Services
DAV Department of MainePO Box 3415 Augusta,ME 04330	51-0169791	501(c)(4)	29,730				Veteran Services
DAV Department of Maryland 101 North Gay Street B Baltimore,MD 21202	52-6055613	501(c)(4)	60,557				Veteran Services
DAV Department of MassachusettsRoom 546 State House Boston,MA 02133	04-2170836	501(c)(4)	124,613				Veteran Services
DAV Department of Michigan 17779 East Fourteen Mile Road Fraser,MI 48026	38-0489155	501(c)(4)	110,453				Veteran Services
DAV Department of Minnesota20 West 12th Street 3rd Floor St Paul,MN 55155	41-0641627	501(c)(4)	70,258				Veteran Services
DAV Department of MississippiPO Box 1579 Jackson,MS 39215	64-6034899	501(c)(4)	26,879				Veteran Services
DAV Department of Missouri 413 West Hickory Kirksville,MO 63501	43-1428547	501(c)(4)	71,474				Veteran Services

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
DAV Department of Montana PO Box 4789 Fort Harrison,MT 59636	81-0245122	501(c)(4)	17,324				Veteran Services
DAV Department of Nebraska2533 North 83rd Street Lincoln,NE 685073390	47-0462717	501(c)(4)	27,144				Veteran Services
DAV Department of Nevada 2775 Meadow Park Avenue Henderson,NV 890527023	88-0191079	501(c)(4)	25,550				Veteran Services
DAV Department of New HampshirePO Box 2051 Dover,NH 03820	02-6018967	501(c)(4)	22,357				Veteran Services
DAV Department of New Jersey135 West Hanover Street 4th Floor Trenton,NJ 08618	31-1017334	501(c)(4)	79,691				Veteran Services
DAV Department of New Mexico2511 Utah NE Albuquerque,NM 87110	85-0131116	501(c)(4)	42,421				Veteran Services
DAV Department of New York162 Atlantic Avenue Lynbrook,NY 11563	11-2248726	501(c)(4)	204,058				Veteran Services
DAV Department of North CarolinaPO Box 28146 Raleigh,NC 27611	56-6061261	501(c)(4)	144,355				Veteran Services
DAV Department of North Dakota425 7th Avenue West Williston,ND 588014909	45-0232777	501(c)(4)	18,253				Veteran Services
DAV Department of OhioPO Box 15099 Columbus,OH 43215	31-4166963	501(c)(4)	140,790				Veteran Services
DAV Department of Oklahoma2311 North Central Avenue 1000B Oklahoma City,OK 73105	73-6112085	501(c)(4)	76,714				Veteran Services
DAV Department of Oregon 5922 NE 55th Avenue Portland,OR 972182302	93-0155562	501(c)(4)	38,072				Veteran Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
DAV Department of Pennsylvania4219 Trindle Road Camp Hill, PA 17011	23-0520283	501(c)(4)	145,428				Veteran Services
DAV Department of Rhode Island380 Westminster Street 2nd Floor Providence, RI 02903	05-6023646	501(c)(4)	20,659				Veteran Services
DAV Department of South CarolinaPO Box 5317 West Columbia, SC 29171	57-0600471	501(c)(4)	61,218				Veteran Services
DAV Department of South Dakota1519 West 51st Street Sioux Falls, SD 57105	46-6016959	501(c)(4)	18,206				Veteran Services
DAV Department of TennesseeWar Memorial Building G-22 Nashville, TN 37243	62-6074303	501(c)(4)	73,074				Veteran Services
DAV Department of Texas3003 North Medford Drive Lufkin, TX 75901	75-6053959	501(c)(4)	264,669				Veteran Services
DAV Department of Utah273 East 800 South Salt Lake City, UT 84111	87-6151236	501(c)(4)	26,858				Veteran Services
DAV Department of VermontPO Box 828 White River Junction, VT 05001	03-6015639	501(c)(4)	10,588				Veteran Services
DAV Department of VirginiaPO Box 7176 Roanoke, VA 24019	54-0697376	501(c)(4)	155,436				Veteran Services
DAV Department of Washington19508 Road A3 NE Soap Lake, WA 988510447	91-0544487	501(c)(4)	99,648				Veteran Services
DAV Department of West VirginiaPO Box 274 Oceana, WV 248700274	55-0521769	501(c)(4)	35,837				Veteran Services
DAV Department of Wisconsin130 Dauphin Street Green Bay, WI 54301	39-0244255	501(c)(4)	66,207				Veteran Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
DAV Department of Wyoming 219 Ames Avenue Cheyenne, WY 820072218	23-7041066	501(c)(4)	7,848				Veteran Services
DAV Department of Puerto Rico PO Box 76 Puerto Real, PR 007400076	23-7352551	501(c)(4)	33,013				Veteran Services
DAV Department of Hawaii 2685 North Nimitz Highway Honolulu, HI 96819	99-0105357	501(c)(4)	33,378				Veteran Services
DAV Department of Alaska 3413 Conifer Drive North Pole, AK 997056435	52-1648345	501(c)(4)	11,121				Veteran Services
Disabled Veterans Life Memorial Foundation 6274 Linton Boulevard Suite 105 Delray Beach, FL 33484	52-2098855	501(c)(3)	2,438,917				Veteran Memorial
Columbia Trust Service Programs 3725 Alexandria Pike Cold Spring, KY 41076	52-1516071	501(c)(4)	37,375				Veteran Services
Department of Veterans Affairs 50 Irving Street NW Washington, DC 20422		Gov't Entity	565,894				Winter Sports Clinic
Department of Veterans Affairs 50 Irving Street NW Washington, DC 20422		Gov't Entity	182,579				Van Program
Women in Military Service for America Department 560 Washington, DC 200420560	52-1513535	501(c)(3)	8,000				Veteran Services
The Aleethia Foundation 1718 M Street NW Suite 1170 Washington, DC 20036	51-0529300	501(c)(3)	8,000				Veteran Services
Intrepid Museum Foundation One Intrepid Square New York, NY 10036	13-3062419	501(c)(3)	11,000				Veteran Services
Iraq and Afghanistan Veterans of America 292 Madison Avenue 10th Floor New York, NY 10017	20-1664531	501(c)(3)	10,000				Veteran Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
USO 2111 North Wilson Boulevard Suite 1200 Arlington, VA 22201	13-1610451	501(c)(3)	15,000				Veteran Services
US Association of Former Members of Congress 1401 K Street NW 503 Washington, DC 20005	54-0883744	501(c)(3)	10,000				Governmental Education

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization Disabled American Veterans	Employer identification number 31-0263158
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Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	☒ First-class or charter travel ☐ Housing allowance or residence for personal use ☒ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☒ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	☐ Compensation committee ☐ Written employment contract ☒ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) Arthur Wilson	(i)	249,876	16,536	12,713	63,300	2,652	345,077	0
	(ii)	0	0	0	0	0	0	0
(2) Richard E Patterson	(i)	101,161	3,371	77,841	6,430	2,517	191,320	0
	(ii)	0	0	0	0	0	0	0
(3) J Marc Burgess	(i)	116,644	25,685	2,883	73,475	596	219,283	0
	(ii)	0	0	0	0	0	0	0
(4) David Gorman	(i)	176,634	4,382	52,895	42,595	546	277,052	0
	(ii)	0	0	0	0	0	0	0
(5) Christopher Clay	(i)	176,231	7,758	5,531	109,724	7,270	306,514	0
	(ii)	0	0	0	0	0	0	0
(6) Anita Blum	(i)	145,163	15,600	4,139	72,736	4,778	242,416	0
	(ii)	0	0	0	0	0	0	0
(7) Jeffery Hall	(i)	102,959	11,196	75,450	25,084	4,778	219,467	0
	(ii)	0	0	0	0	0	0	0
(8) Garry Augustine	(i)	114,401	43,583	3,679	79,384	2,508	243,555	0
	(ii)	0	0	0	0	0	0	0
(9) Edward Reese	(i)	108,698	15,408	27,122	56,276	7,375	214,879	0
	(ii)	0	0	0	0	0	0	0
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	Part I, Line 1a	First Class or Charter Travel. DAV -paid airfare is typically for coach-class travel. First-class airfare may be approved considering such factors as: the degree to which the traveler is disabled and the length of the trip. In 2010, two persons listed on Schedule J, Part I, traveled first class for DAV related business. It was not considered taxable income. DAV does not pay for charter travel. 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 either confers an actual benefit on DAV or 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 taxable income. In all other situations, companion expenses are either reimbursed by the DAV traveler or included in taxable income. In 2010, DAV paid for companion travel of one person listed on Schedule J, Part I. Discretionary spending account. During their one-year, nonsuccessive term, DAV pays the National Commander an annual expense allowance prorated from the date of his election to the date of the election of his 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 2010, Roberto Barrera, DAV National Commander (January to August) received \$88,441 and Wallace Tyson, DAV National Commander (September to December) received \$86,559 for such payments.
	Part I, Line 7	DAV has a Leadership Incentive Program that offers an additional percentage of annual base salary to about 40 employees - primarily key executives, directors and managers. The award percentage is based on the individual participant's position and the organization's measured success meeting 7 goals - one related to achievement of standard ratios published by the BBB Wise Giving Alliance and 6 based on DAV strategic plan goals. The Program was designed with assistance from an outside, independent consultant and approved by the Board of Directors.

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons
▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization
Disabled American Veterans

Employer identification number
31-0263158

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$										

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Wilson David	Officer's fam membr	75,516	Employment		No
(2) Patterson William	Officer's fam membr	49,994	Employment		No

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Disabled American Veterans

Employer identification number
31-0263158

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles .				
7 Boats and planes				
8 Intellectual property . .				
9 Securities—Publicly traded	X	29	322,456	Cost/selling price
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 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 ► (Laptops)	X	10	9,650	Cost/selling price
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		Yes	No
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes	
b	If "Yes," describe in Part II			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Third Party Use	Part I, Line 32b	Non-cash contributions (securities) are received, processed, and sold by Fifth Third Bank, Cincinnati, OH

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization Disabled American Veterans	Employer identification number 31-0263158
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Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		DAV is a not-for-profit organization with members that have the right to participate in the organization's governance. They, or their delegates, elect four members of DAV's Board of Directors.

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		Please see Form 990, Part VI, Section A, Line 6

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		Following completion of Form 990 (Form) by the 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.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 12c	All members of the Board of Directors receive a copy of the Conflict of Interest Policy immediately upon assuming office, or at a minimum, annually. The same process applies to key employees and department directors. Recipients 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.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 15	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. 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 members 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 a daily per diem of \$250 when attending meetings or representing DAV at various related events. This is primarily to cover meals and lodging.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	Governing documents and the conflict of interest policy are available upon request. The DAV Annual Report and most recent Form 900 are available on DAV's website (www.dav.org) and also upon request or public inspection at DAV National Headquarters.

Identifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Net unrealized gains on investments 18,559,125 Adjustment to Minimum Pension Liability & Effect of Provisions of ASC 715 2,718,236 Total to Form 990, Part XI, Line 5 21,277,361

Additional Data

Software ID:
Software Version:
EIN: 31-0263158
Name: Disabled American Veterans

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code	) (Expenses \$	22,763,911 including grants of \$	) (Revenue \$
LEGISLATIVE PROGRAM The DAV's National Legislative Department is engaged in a number of efforts to improve, advance and protect interests of disabled veterans, their families, widowed spouses, and surviving children in the legislative and public policy arena Through direct contact with legislators, congressional testimony, and ongoing, concentrated grassroots lobbying, the DAV strives to be the voice of America's wartime disabled veterans No funds from charitable contributions are used to cover the expenses of the DAV's Legislative Program, with the exception of contributions donated explicitly to fund legislative efforts All other legislative operations are funded from membership dues During 2010, \$1,693,509 was spent on legislative activities PUBLIC AWARENESS OUTREACH Too many disabled veterans remain in need of federal benefits and services they've earned but haven't used Generally, these veterans aren't aware of their entitlements or the free help the DAV National Service Program can provide in filing for VA and other government benefits Further, many aren't aware of the various programs the DAV offers for disabled veterans and their families In a nontraditional approach, the Public Awareness Outreach Program asks our donors to help identify these veterans and get them into contact with the DAV In 2010, \$21,070,402 was spent on this large-scale outreach effort, an investment that's paying real dividends in the lives of disabled veterans and their families This program supplements the outreach efforts already built into the DAV's other program services It offers the American people an even greater opportunity to become personally involved in identifying and assisting those in need of DAV programs and services			