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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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

BLINDED VETERANS ASSOCIATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

Room/suite

477 H STREET NW

City or town, state or country, and ZIP + 4

WASHINGTON, DC 200012694

F Name and address of principal officer

AL AVINA

477 H STREET NW

WASHINGTON,DC 200012694

D Employer identification number

53-0214281

E Telephone number

(202) 371-8880

G Gross receipts \$ 6,213,885

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: WWW BVA ORG

K Form of organization ☐ Corporation ☐ Trust ☒ Association ☐ Other

L Year of formation 1945

M State of legal domicile DC

Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities TO PROMOTE THE WELFARE OF BLINDED VETERANS - SEE PART III AND SCHEDULE O		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	11
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
Revenue	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	37
	6	Total number of volunteers (estimate if necessary)	6	298
	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
	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	5,120,384	4,060,178
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
Expenses	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	370,779	174,213
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	322,727	255,054
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,813,890	4,489,445
	14	Benefits paid to or for members (Part IX, column (A), line 4)	13,500	13,450
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,537,085	1,574,153
	b	Total fundraising expenses (Part IX, column (D), line 25) 1,431,952	0	0
Net Assets or Fund Balances	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,873,020	2,984,782
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	4,423,605	4,572,385
	19	Revenue less expenses Subtract line 18 from line 12	1,390,285	-82,940
			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	10,196,760	9,991,226
	21	Total liabilities (Part X, line 26)	268,799	232,988
	22	Net assets or fund balances Subtract line 21 from line 20	9,927,961	9,758,238

Part II

Signature Block

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

2012-11-02

Date

AL AVINA EXECUTIVE DIRECTOR

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

DAVID L JOHNSON

Date

2012-11-02

Check if self-employed

☐

Preparer's taxpayer identification number (see instructions)

P00188102

Firm's name (or yours if self-employed), address, and ZIP + 4

DIXON HUGHES GOODMAN LLP

1410 SPRING HILL ROAD STE 500

TYSONS, VA 22102

EIN

56-0747981

Phone no

(703) 970-0400

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

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

TO PROMOTE THE WELFARE OF BLINDED VETERANS SO THAT, NOTWITHSTANDING THEIR DISABILITIES, THEY MAY TAKE THEIR RIGHTFUL PLACE IN THE COMMUNITY TO PRESERVE AND STRENGTHEN A SPIRIT OF FELLOWSHIP AMONG BLINDED VETERANS SO THAT THEY MAY GIVE MUTUAL AID AND ASSISTANCE TO ONE ANOTHER TO EDUCATE THE GENERAL PUBLIC SO THEY MAY UNDERSTAND WHAT BLINDED VETERANS MAY ACCOMPLISH AND HOW TO ASSIST BLINDED VETERANS THEY MAY ENCOUNTER IN THEIR COMMUNITIES

2

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

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?

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 1,253,074 including grants of \$) (Revenue \$)	FIELD SERVICE AND VOLUNTEER SERVICE PROGRAMSSEE SCHEDULE O
4b	(Code) (Expenses \$ 1,278,657 including grants of \$) (Revenue \$)	PUBLIC EDUCATION AND COMMUNICATIONSEE SCHEDULE O
4c	(Code) (Expenses \$ 185,147 including grants of \$) (Revenue \$)	ADVOCACYSEE SCHEDULE O
	(Code) (Expenses \$ 246,290 including grants of \$ 12,150) (Revenue \$)	MEMBERSHIP AND SCHOLARSHIP PROGRAM
4d	Other program services (Describe in Schedule O) (Expenses \$ 246,290 including grants of \$ 12,150) (Revenue \$)	
4e	Total program service expenses	\$ 2,963,168

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3		No
4	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	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? 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 temporarily restricted endowments, permanent endowments, 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		No
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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	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, Part 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, Part 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	17		No
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. All Form 990 filers that operated one or more hospitals must attach audited financial statements	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		No
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		No
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 questions 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		No
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 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		No
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
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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>	35b		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		No
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 ☐		
		YesNo
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a10
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1cYes
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	2a37
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)	2bYes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3aNo
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 or securities account)?	4aNo
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? . . .	5aNo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5bNo
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?	6aNo
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?	7aNo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7cNo
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?	7eNo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7fNo
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. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a
b	Enter the aggregate 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 aggregate amount of reserves on hand	13c
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14aNo
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	1a 11		
b Enter the number of voting members included in line 1a, above, who are independent	1b 11		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6	Yes	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
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 Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a Has the organization provided a complete 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 the Form 990			
12a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	Yes	
b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13 Did the organization have a written whistleblower policy?	13	Yes	
14 Did the organization have a written document retention and destruction policy?	14	Yes	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed	AR, AZ, CT, GA, IL, MA, MD, ME, MN, MS, NC, ND, NJ, NM, NV, NY, OH, OR, PA, RI, SC, TN, 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 made 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 made 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	BLINDED VETERANS ASSOCIATION 477 H STREET NW WASHINGTON, DC 20001 (202) 371-8880

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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 organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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) SAMUEL HUHNNATIONAL PRESIDENT	19 20	X		X				0	0	0
(2) MARK CORNELLNATIONAL VICE PRESIDENT	15 40	X		X				0	0	0
(3) ROBERT DALE STAMPERNATIONAL SECRETARY	9 60	X		X				0	0	0
(4) ROY YOUNGNATIONAL TREASURER	23 10	X		X				0	0	0
(5) DAVID VAN LOANDIRECTOR - DISTRICT 1	21 90	X						0	0	0
(6) FREDDIE EDWARDSDIRECTOR - DISTRICT 2	10 60	X						0	0	0
(7) JOE PARKERDIRECTOR - DISTRICT 3	9 10	X						0	0	0
(8) ROBERT MOWERDIRECTOR - DISTRICT 4	20 80	X						0	0	0
(9) DR GEORGE STOCKINGDIRECTOR - DISTRICT 5	20 70	X						0	0	0
(10) RONALD ANDERSONDIRECTOR - DISTRICT 6	17 30	X						0	0	0
(11) DR ROY W KEKAHUNAPAST NATIONAL PRESIDENT	9 10	X		X				0	0	0
(12) JOE BURNSOMBUDSMAN	5 80			X				0	0	0
(13) AL AVINACURRENT EXECUTIVE DIRECTOR/ ASS'T	37 50			X				0	0	0
(14) THOMAS MILLERFORMER EXECUTIVE DIRECTOR/ ASS'T	37 50			X				118,597	0	1,440
(15) BRIGITTE JONESADMINISTRATIVE DIRECTOR/AS	37 50			X				65,579	0	1,314
(16) STUART NELSONCOMMUNICATIONS COORDINATOR	37 50			X				52,586	0	10,920
(17) CHERYL SWAIMDIRECTOR OF DEVELOPMENT/OF	37 50			X				85,606	0	1,264

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	428,980	0	16,524

2 Total number of individuals (including but not limited to those 1
\$100,000 of reportable compensation from the organization) 2

		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>	3	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>	4	No
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>	5	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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SOUTHWEST PUBLISHING & MAILING CORP 2600 NW TOPEKA BLVD TOPEKA, KS 66617	LETTERSHOP SERVICES	464,607
THE DIRECT EDGE INC 10375-B SOUTHERN MD BLVD DUNKIRK, MD 20754	LETTERSHOP & PRINTING SERVICES	244,891
MARCY YOLLES 168 WOODSIDE TRAIL ANNAPOLIS, MD 21401	PRINTING SERVICES	172,452
ALANIZ LLC 425 N IRIS STREET MT PLEASANT, IA 52641	LETTERSHOP & PRINTING SERVICES	100,804

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 4

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	21,046			
	b	Membership dues	1b	34,701			
	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	4,004,431			
	g	Noncash contributions included in lines 1a-1f \$ ²⁹¹					
	h	Total. Add lines 1a-1f					
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		216,885		
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties					
6a		Gross rents	(i) Real (ii) Personal				
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	-42,672			-42,672
b		Less cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)					
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		MAILING LIST RENTAL TO	900099	240,959			240,959
b		CONVENTION & RELATED	900099	14,095			14,095
c							
d		All other revenue					
e		Total. Add lines 11a-11d			255,054		
12	Total revenue. See Instructions			4,489,445	0	0	429,267

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)

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

☒

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 United States See Part IV, line 21	1,300	1,300		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	12,150	12,150		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	451,525	79,030	278,973	93,522
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	823,459	609,779	155,829	57,851
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,120	4,309	447	364
9	Other employee benefits	183,024	105,293	68,297	9,434
10	Payroll taxes	111,025	65,493	34,745	10,787
11	Fees for services (non-employees)				
a	Management				
b	Legal	11,750		11,750	
c	Accounting	26,021		26,021	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	1,680,171	725,850	126,508	827,813
12	Advertising and promotion	4,560			4,560
13	Office expenses	879,855	354,040	114,216	411,599
14	Information technology	5,850	495	5,355	
15	Royalties				
16	Occupancy	37,105		37,105	
17	Travel	131,879	81,715	50,164	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,167	4,082	6,452	633
20	Interest				
21	Payments to affiliates	94,143	94,143		
22	Depreciation, depletion, and amortization	69,218		69,218	
23	Insurance	33,063		33,063	
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	SEE SCH O ALLOC OF I	0	825,489	-840,878	15,389
b					
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	4,572,385	2,963,168	177,265	1,431,952
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	2,080,979	944,523	69,940	1,066,516

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			379,690	1	1,307,697
	2	Savings and temporary cash investments			100,338	2	100,953
	3	Pledges and grants receivable, net			1,952,251	3	981,636
	4	Accounts receivable, net				4	1,800
	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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			43,629	9	33,702
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D.	10a	3,022,340	1,668,117	10c	1,608,332
	b	Less: accumulated depreciation	10b	1,414,008			
	11	Investments—publicly traded securities			6,052,735	11	5,957,106
	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				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			10,196,760	16	9,991,226
Liabilities	17	Accounts payable and accrued expenses			268,799	17	232,988
	18	Grants payable				18	
	19	Deferred revenue				19	
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			268,799	26	232,988
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			9,100,185	27	9,234,929
	28	Temporarily restricted net assets			827,776	28	523,309
	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			9,927,961	33	9,758,238
	34	Total liabilities and net assets/fund balances			10,196,760	34	9,991,226

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	4,489,445
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,572,385
3	Revenue less expenses Subtract line 2 from line 1	3	-82,940
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,927,961
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-86,783
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	9,758,238

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 A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization BLINDED VETERANS ASSOCIATION	Employer identification number 53-0214281
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3,372,337	3,556,724	3,880,975	5,957,958	5,080,161	21,848,155
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,372,337	3,556,724	3,880,975	5,957,958	5,080,161	21,848,155
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						836,060
6 Public Support. Subtract line 5 from line 4						21,012,095

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	3,372,337	3,556,724	3,880,975	5,957,958	5,080,161	21,848,155
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	495,818	281,100	221,936	244,434	216,885	1,460,173
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	269,347	231,008	248,030	242,764	240,959	1,232,108
11 Total support (Add lines 7 through 10)						24,540,436

12 Gross receipts from related activities, etc (See instructions)

12138,106

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	85 620 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	84 160 %
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization BLINDED VETERANS ASSOCIATION	Employer identification number 53-0214281
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check
- ☐
- if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check
- ☐
- if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		40,000													
c Total lobbying expenditures (add lines 1a and 1b)		40,000													
d Other exempt purpose expenditures		4,532,385													
e Total exempt purpose expenditures (add lines 1c and 1d)		4,572,385													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		378,619													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		94,655													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount		367,425	371,181	378,619	1,117,225
b Lobbying ceiling amount (150% of line 2a, column(e))					1,675,838
c Total lobbying expenditures		40,000	40,000	40,000	120,000
d Grassroots non-taxable amount		91,856	92,795	94,655	279,306
e Grassroots ceiling amount (150% of line 2d, column (e))					418,959
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
PART IV, SUPPLEMENTAL INFORMATION		BVA SENT LETTERS TO AND MET DIRECTLY WITH GOVERNMENT OFFICIALS AND LEGISLATORS, AND COMMUNICATED TO ITS MEMBERS BY ELECTRONIC NEWSLETTERS. BVA'S EFFORTS ARE CONCENTRATED ON LEGISLATION AFFECTING BLIND REHABILITATION PROGRAMS AND SERVICES OFFERED BY THE FEDERAL GOVERNMENT THROUGH THE DEPARTMENT OF VETERANS AFFAIRS TO BLINDED VETERANS. SEE SCHEDULE O FOR MORE INFORMATION ON BVA'S ADVOCACY PROGRAM.

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization
BLINDED VETERANS ASSOCIATION

Employer identification number
53-0214281

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 ▶ \$ _____

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

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

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

(ii)

related organizations

b

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

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		644,439		644,439
b Buildings		2,232,486	1,273,206	959,280
c Leasehold improvements				
d Equipment				
e Other		145,415	140,802	4,613
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				1,608,332

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)	14,489,445
2	Total expenses (Form 990, Part IX, column (A), line 25)	4,572,385
3	Excess or (deficit) for the year Subtract line 2 from line 1	-82,940
4	Net unrealized gains (losses) on investments	-86,783
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 - 8	-86,783
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	-169,723

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	15,384,550
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a	-86,783
b	Donated services and use of facilities2b	981,888
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e	895,105
3	Subtract line 2e from line 13	4,489,445
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 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5	4,489,445

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	15,554,273
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	981,888
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e	981,888
3	Subtract line 2e from line 13	4,572,385
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 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5	4,572,385

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	THE ASSOCIATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS NOT A PRIVATE FOUNDATION WITHIN THE MEANING OF SECTION 509(A) OF THE INTERNAL REVENUE CODE, ACCORDINGLY, THE ACCOMPANYING FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION OR LIABILITY FOR FEDERAL OR STATE INCOME TAXES. THE ASSOCIATION HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF JUNE 30, 2012 AND JUNE 30, 2011. YEARS ENDING ON OR AFTER JUNE 30, 2009 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES.

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
BLINDED VETERANS ASSOCIATION

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

2011

Open to Public
Inspection

Employer identification number
53-0214281

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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(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

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3

Enter total number of other organizations listed in the line 1 table ▶

Part IIIGrants 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	6	11,600		CASH	
(2) SERVICE AWARDS	2	550		CASH	

Part IVSupplemental 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 ATTENDING COLLEGE OR UNIVERSITY LISTED ON THE RECIPIENT'S SCHOLARSHIP APPLICATION IS CONTACTED BY A BVA EMPLOYEE FUNDS ARE DISBURSED DIRECTLY TO THAT SCHOOL UPON RECEIPT OF AN INVOICE FOR PAYMENT RATIFYING THE FACT THAT THE STUDENT IS ENROLLED

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

2011

Open to Public
Inspection

Name of the organization BLINDED VETERANS ASSOCIATION	Employer identification number 53-0214281
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE MEMBERS AND ASSOCIATE MEMBERS ASSEMBLED AT THE ANNUAL NATIONAL CONVENTION HAVE VOTING RIGHTS AND ARE THE SUPREME AUTHORITY OF THE ASSOCIATION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS AND ASSOCIATE MEMBERS ASSEMBLED AT THE ANNUAL NATIONAL CONVENTION ELECT THE NATIONAL OFFICERS OF THE NATIONAL BOARD OF DIRECTORS THE DISTRICT DIRECTORS ARE ELECTED BY THE MEMBERS AND ASSOCIATE MEMBERS WITHIN THEIR RESPECTIVE GEOGRAPHICAL DISTRICT

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	THE MEMBERS AND ASSOCIATE MEMBERS ASSEMBLED AT THE ANNUAL NATIONAL CONVENTION APPROVE ISSUES AND AMENDMENTS THAT ARISE REGARDING LAWS, BYLAWS, REGULATIONS, OR POLICIES ADOPTED BY SAID MEMBERSHIP

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	A DRAFT OF THE FORM 990 IS SENT TO THE CHIEF FINANCIAL OFFICER BY THE PREPARER. IT IS EMAILED TO THE FINANCIAL EXPERT OF THE AUDIT COMMITTEE AND THE EXECUTIVE DIRECTOR WHO ALONG WITH THE CHIEF FINANCIAL OFFICER REVIEW THE RETURN TOGETHER AND DISCUSS ANY ISSUES OF CONCERN. THEY MAY INDIVIDUALLY OR COLLECTIVELY SPEAK WITH THE PREPARER TO DISCUSS THEIR CONCERNS OR REVIEW THE FORM IN DETAIL. AFTER ANY CHANGES ARE MADE, A COPY IS SENT TO THE FULL BOARD PRIOR TO FILING. ANY COMMENTS THEY HAVE ARE REVIEWED AND DISCUSSED WITH THE PREPARER. WHEN COMPLETED, THE FORM 990 IS SIGNED BY THE EXECUTIVE DIRECTOR AND FILED WITH THE INTERNAL REVENUE SERVICE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	BVA'S WRITTEN CONFLICT OF INTEREST POLICY QUESTIONNAIRE IS DISTRIBUTED TO ALL BOARD MEMBERS, EMPLOYEES, AND APPROPRIATE OUTSIDE PARTIES BY THE CFO PRIOR TO THE ANNUAL CONVENTION THE CFO ENSURES THAT ALL QUESTIONNAIRES ARE COMPLETED, REVIEWS THEM, AND DISCLOSES ANY CONFLICTS AT THE PRE-CONVENTION BOARD MEETING BOARD MEMBERS WHO HAVE CONFLICTS DO NOT VOTE ON ANY ISSUES PERTAINING TO THAT CONFLICT

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR ESTABLISHING AND MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR ALL EMPLOYEES OF THE ASSOCIATION INCLUDING THE EXECUTIVE DIRECTOR, OTHER OFFICERS, AND KEY EMPLOYEES THEY MEET ANNUALLY, AND AS NEEDED, TO REVIEW, DETERMINE, AND APPROVE ANY CHANGES TO BE MADE TO THE COMPENSATION PROGRAM DURING THE ANNUAL MEETING THE EXECUTIVE COMMITTEE COMPARES THE SALARIES OF THE EXECUTIVE DIRECTOR, OTHER OFFICERS, AND KEY EMPLOYEES AGAINST EITHER SALARY SURVEYS PREPARED BY INDEPENDENT THIRD PARTIES, OR COMPARABILITY DATA FROM PEER ORGANIZATIONS TO DETERMINE HOW THEY COMPARE AGAINST THE COMPETITIVE MARKET THIS COMPARISON HAS HISTORICALLY SHOWN TRENDS OF COMPARABILITY IN SOME POSITIONS AND BELOW PEERS IN OTHERS THE COMMITTEE CONSIDERS RECOMMENDATIONS AND INPUT FROM THE EXECUTIVE DIRECTOR DURING DELIBERATIONS REGARDING OTHER OFFICERS AND KEY EMPLOYEES USUALLY, THE EXECUTIVE COMMITTEE GOES INTO EXECUTIVE SESSION WHEN DISCUSSING THE EXECUTIVE DIRECTOR'S COMPENSATION WITHOUT THE EXECUTIVE DIRECTOR PRESENT DURING THIS TIME THEY EVALUATE THE EXECUTIVE DIRECTOR'S PERFORMANCE AND DETERMINE COMPENSATION THESE DELIBERATIONS AND DECISIONS ARE DOCUMENTED THE PRESIDENT INFORMS THE EXECUTIVE DIRECTOR OF ANY CHANGES AFTER THE MEETING IS ADJOURNED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE BY LAWS AND CONGRESSIONAL CHARTER OF THE ASSOCIATION ARE AVAILABLE ON BVA'S WEBSITE, ALONG WITH THE FORM 990. ADDITIONAL INFORMATION IS AVAILABLE UPON REQUEST.

Identifier	Return Reference	Explanation
INDIRECT AND JOINT COST ALLOCATIONS	FORM 990, PART IX, LINES 24A AND 26	IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPALS (GAAP) BVA ALLOCATES INDIRECT COSTS FOR ITEMS SUCH AS BUILDING REPAIRS AND MAINTENANCE, GENERAL OFFICE SUPPLIES, AND GENERAL INSURANCE TO THE PROGRAM, MANAGEMENT AND GENERAL, AND FUNDRAISING FUNCTIONS. THIS ALLOCATION IS PREPARED IN A CONSISTENT AND SYSTEMATIC MANNER BASED ON A PERCENTAGE OF TIME WORKED BY EACH EMPLOYEE IN THE RESPECTIVE FUNCTION. THIS METHOD HAS BEEN REVIEWED AND APPROVED BY BVA'S INDEPENDENT EXTERNAL AUDITORS. BVA ALSO ALLOCATES A PORTION OF ITS DIRECT MAIL EXPENSES TO PUBLIC EDUCATION AND MANAGEMENT AND GENERAL ACCORDING TO THE AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS STATEMENT OF POSITION (SOP) 98-2. BVA UNDERTAKES A PRELIMINARY ANALYSIS OF ITS ACTIVITIES TO DETERMINE IF THE PURPOSE, AUDIENCE, AND CONTENT CRITERIA ARE MET AND, IF SO, APPLIES A SYSTEMATIC, RATIONAL JOINT COST ALLOCATION METHODOLOGY. BVA MAKES ITS FINANCIAL INFORMATION AVAILABLE TO THE GENERAL PUBLIC AND WATCHDOG AGENCIES. BVA ADHERES TO THE REQUIREMENTS SET FORTH BY THE COMBINED FEDERAL CAMPAIGN, THE BETTER BUSINESS BUREAU, AND GUIDESTAR.ORG. BVA IS PROUD TO DISPLAY ITS SEAL AWARDED BY BBB AS AN ACCREDITED CHARITY.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -86,783

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 1	THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE THE BLINDED VETERANS ASSOCIATION (BVA) IS THE ONLY CONGRESSIONALLY CHARTERED VETERANS SERVICE ORGANIZATION (VSO) EXCLUSIVELY DEDICATED TO SERVING THE NEEDS AND PROMOTING THE WELFARE OF AMERICA'S BLINDED VETERANS AND THEIR FAMILIES. BVA IS A NONPROFIT 501(C)3 TAX-EXEMPT ORGANIZATION ESTABLISHED IN 1945 IN AVON, CONNECTICUT, BY A SMALL GROUP OF COMBAT-BLINDED VETERANS FROM WORLD WAR II. THE ORGANIZATION'S PRIMARY PURPOSE INCLUDES LOCATING BLINDED VETERANS WHO NEED SERVICES, GUIDING THEM THROUGH THE REHABILITATION PROCESS, AND ACTING AS ADVOCATES FOR THEM AND THEIR FAMILIES IN THE PRIVATE AND PUBLIC SECTORS, INCLUDING THE U.S. CONGRESS AND THE DEPARTMENT OF VETERANS AFFAIRS (VA). BVA ALSO PROVIDES ROLE MODELS WHO DEMONSTRATE THAT THE CHALLENGES OF BLINDNESS CAN BE OVERCOME. THE ASSOCIATION SERVES AS A MEDIUM OF COMMUNICATION REGARDING ISSUES AFFECTING BLINDED VETERANS, SUPPORTS VOCATIONAL AND RECREATIONAL PROGRAMS THAT FOSTER REHABILITATION, AND OFFERS ENCOURAGEMENT AND EMOTIONAL SUPPORT. VA ESTIMATES THAT SOME 156,000 AMERICAN VETERANS ARE CURRENTLY LEGALLY BLIND, AND AT LEAST HALF OF THESE MEN AND WOMEN REMAIN UNAWARE OF THEIR ELIGIBILITY FOR SPECIAL SERVICES AND BENEFITS. APPROXIMATELY 6,000 ADDITIONAL VETERANS BECOME BLIND OR VISUALLY IMPAIRED EVERY YEAR. BVA PROGRAMS HELP VETERANS AND THEIR FAMILIES MEET THE CHALLENGES OF BLINDNESS. THERE IS NO CHARGE FOR ANY BVA SERVICE AND MEMBERSHIP IN THE ORGANIZATION IS NOT A PREREQUISITE. ALL LEGALLY BLINDED VETERANS ARE ELIGIBLE FOR ASSISTANCE, WHETHER THEY BECAME BLIND DURING COMBAT OR AFTER ACTIVE DUTY DUE TO AGE OR DISEASE. BVA WAS INCORPORATED IN 1947 AND CHARTERED BY CONGRESS IN 1958 TO REPRESENT ALL BLINDED VETERANS. THE ASSOCIATION DOES NOT RECEIVE ANY GRANTS OR FINANCIAL SUPPORT FROM THE GOVERNMENT; INSTEAD, IT IS SUPPORTED BY THE GENEROUS CONTRIBUTIONS OF THOUSANDS OF AMERICANS WHO REMEMBER THE SACRIFICES OF OUR NATION'S BLINDED VETERANS. THE ORGANIZATION IS MANAGED BY 11 VOTING MEMBERS OF THE NATIONAL BOARD OF DIRECTORS, ALONG WITH THE AUDIT COMMITTEE CHAIR, WHOSE POSITIONS ARE HELD ON A VOLUNTARY BASIS. THEY GIVE FREELY OF THEIR TIME AND RESOURCES. THEY ARE ALL MEMBERS OF BVA AND ALL MEET THE REQUIREMENTS OF BEING BLINDED VETERANS AS DEFINED FOR ALL BVA MEMBERS. THESE REQUIREMENTS ARE ALSO MET BY THE NATIONAL SERGEANT-AT-ARMS AND THE NATIONAL CHAPLAIN. BOARD MEMBERS TRAVEL INCLUDES THE ATTENDANCE OF TWO ANNUAL BOARD MEETINGS: ONE HELD AT THE ANNUAL CONVENTION LOCATION AND THE OTHER AT BVA'S NATIONAL HEADQUARTERS. THEY ALSO CONDUCT BUSINESS USING EMAIL AND THROUGH TELEPHONE CONVERSATIONS DURING THE FISCAL YEAR. THEY ARE INVOLVED NOT ONLY AT THE NATIONAL LEVEL BUT ALSO WITHIN THE REGION IN WHICH THEY RESIDE, HOLDING OFFICES AND ASSISTING BLINDED VETERANS AND THEIR FAMILIES. THIS FISCAL YEAR, THE BOARD DONATED A TOTAL OF AT LEAST 9,500 HOURS OF WORK AND MORE THAN \$2,500 OF REIMBURSABLE EXPENSES WHICH WERE NOT REQUESTED FOR PAYMENT. THE NATIONAL BOARD OF DIRECTORS APPOINTS MANY COMMITTEES TO OVERSEE AND ADVISE THEM. ALL OF THE COMMITTEE MEMBERS ARE VOLUNTEERS, SOME ARE ON THE BOARD WHILE OTHERS ARE REGULAR MEMBERS OF THE ORGANIZATION. SOME ARE SIMPLY CONCERNED AND INTERESTED SIGHTED CITIZENS WHO WISH TO LEND A HELPING HAND. DURING THE PAST FISCAL YEAR, COMMITTEE MEMBERS WHO ARE NOT ON THE BOARD DONATED ABOUT 50 HOURS OF VOLUNTEER TIME. BVA HAS 52 REGIONAL GROUPS IN THE UNITED STATES AND PUERTO RICO WHO OFFER EMOTIONAL SUPPORT, SOCIAL EVENTS, AND RECREATIONAL ACTIVITIES TO BLINDED VETERANS AND THEIR FAMILIES AT THE LOCAL LEVEL. REGIONAL GROUPS ALSO INFLUENCE POLICY CHANGES BY THE ASSOCIATION. LOCATED IN WASHINGTON, DC, BVA'S NATIONAL HEADQUARTERS IS WITHIN CLOSE PROXIMITY TO CAPITOL HILL AND THE DEPARTMENT OF VETERANS AFFAIRS (VA) CENTRAL OFFICE.

Identifier	Return Reference	Explanation
PROGRAM SERVICES	FORM 990, PART III, LINE 4	A) FIELD SERVICE AND VOLUNTEER SERVICE PROGRAMS BVA FIELD SERVICE REPRESENTATIVES CONSTITUTE WHAT SISTER ORGANIZATIONS OFTEN REFER TO AS NATIONAL SERVICE OFFICERS. THEY ARE VETERANS AND LEGALLY BLIND THEMSELVES, WORKING IN SEVEN DIFFERENT REGIONS THROUGHOUT THE UNITED STATES, INCLUDING PUERTO RICO. FIELD SERVICE REPRESENTATIVES ARE BASED IN THE FOLLOWING CITIES: PHILADELPHIA, PENNSYLVANIA; THE DISTRICT OF COLUMBIA, DECATUR, GEORGIA; HINES, ILLINOIS; DENVER, COLORADO; HOUSTON, TEXAS; LOS ANGELES, CALIFORNIA; AND MATHER, CALIFORNIA. THEY ARE DEDICATED AND DEVOTED MEMBERS OF BVA'S STAFF. FIELD SERVICE REPRESENTATIVES ASSIST BLINDED VETERANS IN TAKING THE FIRST STEPS IN ADJUSTING TO BLINDNESS. THEY AIM TO HELP VETERANS BRING FOCUS AND DIRECTION TO THEIR LIVES, PROVIDING INSPIRATION, ENCOURAGEMENT, AND PRACTICAL ASSISTANCE IN THE VA BENEFIT CLAIMS PROCESS. UNDERSTANDING THE COMPLEXITIES AND EMOTIONS THAT ACCOMPANY THE ONSET OF BLINDNESS, FIELD SERVICE REPRESENTATIVES ARE EFFECTIVE ROLE MODELS IN HELPING NEWLY BLINDED VETERANS FIND AND FOLLOW THE ROAD TO INDEPENDENCE. THEY KNOW WHAT IS AVAILABLE ON BOTH A LOCAL AND NATIONAL LEVEL. THEY KNOW WHOM TO CALL, WHAT TO SAY, AND HOW TO CUT THROUGH THE RED TAPE SINCE MUCH OF THEIR EXPERTISE HAS BEEN GAINED FIRST-HAND AS A RESULT OF THEIR OWN PERSONAL EXPERIENCES WITH BLINDNESS. DURING FY 2012, THE BVA FIELD SERVICE PROGRAM WAS CONTACTED BY 5,833 VETERANS. VA GRANTED 428 CLAIMS FOR COMPENSATION AND PENSION TO VETERANS ASSISTED BY THE PROGRAM. THE PROGRAM WAS RESPONSIBLE FOR \$5,783,025 IN TOTAL RETROACTIVE PAYMENTS AND \$538,604 IN MISCELLANEOUS BENEFITS. THERE WERE 56 CLAIMS AFFECTING BLINDED VETERANS THAT WERE PROCESSED AT THE BOARD OF VETERANS APPEALS. TOTAL FIELD SERVICE REPRESENTATIVE PENDING CLAIMS STOOD AT 715. THERE WAS A SIGNIFICANT INCREASE IN THESE FIGURES FROM THOSE REPORTED IN FY 2011. FIELD SERVICE REPRESENTATIVES RECEIVED TRAINING TWICE IN FY 2012, ONCE AT THE NATIONAL CONVENTION IN LAS VEGAS, NEVADA IN AUGUST (FIVE DAYS) AND AGAIN AT MID-WINTER MEETINGS IN WASHINGTON, DC (THREE DAYS IN MARCH). BVA PROVIDED FUNDING FOR TRAVEL ARRANGEMENTS AND ASSISTANCE FOR BLINDED VETERANS WITH LIMITED MEANS TO ATTEND VARIOUS VA BLIND REHABILITATION CENTERS. ANOTHER MEANINGFUL ADJUNCT TO THE BVA FIELD SERVICE PROGRAM IS THE 65 VOLUNTEER OFFICES LOCATED IN VA MEDICAL CENTERS, REGIONAL OFFICES, AND OUTPATIENT CLINICS NATIONWIDE. THEY PROVIDE STILL ANOTHER OUTLET FOR BLINDED VETERANS TO HELP AND SERVE ONE ANOTHER. BVA VOLUNTEERS, A LARGE NUMBER OF WHICH ARE BLINDED VETERANS THEMSELVES, DONATED 40,831 HOURS OF TIME. THE NUMBER OF VOLUNTEERS IN THIS PROGRAM IS ABOUT 217. VOLUNTEERS ARE PEER COUNSELORS WHO TALK ONE-ON-ONE WITH INDIVIDUAL BLINDED VETERANS, OR THEY LISTEN AND SHARE IDEAS IN GROUPS. THEY PROVIDE INFORMATION ON PROGRAMS AND SERVICES, ENCOURAGING BLINDED VETERANS TO ENTER BLIND REHABILITATION PROGRAMS AND DEMONSTRATING EQUIPMENT AND AIDS USED BY THE BLIND. THEY ALSO REINFORCE THE WORK OF THE FIELD SERVICE REPRESENTATIVES BY HELPING TO LIFT FELLOW VETERANS FROM THE DISCOURAGEMENT AND FRUSTRATION THEY OFTEN FACE. BECAUSE SO MANY VOLUNTEERS ARE BLINDED VETERANS THEMSELVES, THE NEWLY BLINDED VETERANS CANNOT OFTEN SAY TO A VOLUNTEER, "YOU DON'T KNOW HOW IT FEELS TO BE BLIND." LIKE THE FIELD SERVICE REPRESENTATIVES, BVA VOLUNTEERS CAN, IF THEY BECOME ACCREDITED BY THE VA, WORK AS VOLUNTEER NATIONAL SERVICE OFFICERS (VNSOs) WITH SPECIAL AUTHORITY TO REPRESENT BLINDED VETERANS IN THE FORMAL VA CLAIMS PROCESS. BVA SUPPORTED ONE VOLUNTEER THROUGH THE ACCREDITATION PROCESS THIS FISCAL YEAR, BRINGING THE TOTAL TO 51 VNSOs WHO ARE MEMBERS OF BVA. THERE ARE A TOTAL OF 414 INDIVIDUALS WHO HAVE BVA ACCREDITATION INCLUDING 15 BVA STAFF MEMBERS AND 4 MEMBERS OF THE NATIONAL BOARD. BVA VOLUNTEERS ARE EXPECTED TO BE ACTIVE IN THEIR COMMUNITIES AND TO BE GOOD SOURCES OF INFORMATION ABOUT LOCAL PROGRAMS AND SERVICES. THEY ARE AN IMPORTANT LINK IN THE BVA CHAIN OF SERVICES. AN EXTENSION OF THE FIELD SERVICE PROGRAM, CALLED OPERATION PEER SUPPORT (OPS), WAS ESTABLISHED IN FY 2006. OPS IS AN ONGOING EFFORT TO CONNECT NEWLY BLINDED VETERANS FROM IRAQ AND AFGHANISTAN WITH OTHER OIF AND OEF SERVICE MEMBERS AND VETERANS. IT ALSO SEEKS TO CONNECT THE NEWLY BLINDED SERVICE MEMBERS WITH VETERANS FROM THE FIRST GULF WAR AND FROM VIETNAM, KOREA, AND WORLD WAR II. THIS PAST YEAR, 10 NEWLY BLINDED SERVICE MEMBERS FROM AFGHANISTAN AND IRAQ, ACCOMPANIED BY A SPOUSE OR FAMILY MEMBER, ATTENDED BVA'S 66TH NATIONAL CONVENTION IN LAS VEGAS. TWO BRITISH SOLDIERS WERE ALSO INVITED, AND ACCEPTED THE OPPORTUNITY TO PARTICIPATE IN THE EDUCATIONAL PEER SUPPORT MEETINGS. ALL EXPENSES OF THE NEW PARTICIPANTS WERE PAID BY BVA, AND FIVE ALUMNI OF THE OPS PROGRAM RETURNED TO PARTICIPATE AT THEIR OWN EXPENSE. THEY ALL FELT THE PROGRAM WAS SO BENEFICIAL THAT THEY WANTED TO RETURN AND OFFER ASSISTANCE TO THE NEWLY BLINDED SERVICE MEMBERS AND THEIR FAMILIES. THIS IS ATTRIBUTED TO THE GENEROUS SUPPORT OF INDIVIDUALS AND PRIV

Identifier	Return Reference	Explanation
PROGRAM SERVICES	FORM 990, PART III, LINE 4	ATE COMPANIES THE BVA WEBSITE, WWW.BVA.ORG, WAS UPDATED WITH ONLINE DONATION CAPABILITIES IN ORDER TO FACILITATE GREATER SUPPORT OF THE OPS PROGRAM FROM THE PUBLIC. WHILE OPS PROVIDES THESE VETS THE OPPORTUNITY TO JOIN TOGETHER AT BVA'S NATIONAL CONVENTION IN THE UNITED STATES, A SPIN-OFF PROGRAM, PROJECT GEMINI, ALLOWS THE OPPORTUNITY FOR SOME OF THEM TO BE HOSTED IN ENGLAND BY BLIND VETERANS UK. IN FY2012, EFFORTS MADE IT POSSIBLE FOR 5 BLINDED VETS TO EXPERIENCE BRITISH HOSPITALITY.

Identifier	Return Reference	Explanation
		B) PUBLIC EDUCATION AND COMMUNICATION AT THE FOUNDATION OF ALL BVA COMMUNICATIONS AND PUBLIC RELATIONS EFFORTS NATIONALLY IS THE BVA BULLETIN, CURRENTLY A QUARTERLY PERIODICAL SENT TO ALL BLINDED VETERANS AND THEIR FAMILIES FOR WHOM THE ASSOCIATION HAS CONTACT INFORMATION. THE PUBLICATION IS ALSO MAILED TO DOZENS OF LIBRARIES, HEALTH CARE INSTITUTIONS, VETERANS SERVICE ORGANIZATIONS, VA BLIND REHABILITATION SERVICE EMPLOYEES, AND NONPROFIT ORGANIZATIONS. AS THE FACE OF BVA, THE BULLETIN FOCUSES ON ISSUES AND EVENTS RELATING SPECIFICALLY TO BLINDED VETERANS. IT ALSO COVERS GENERAL TOPICS ABOUT VETERANS AS WELL AS GENERAL TOPICS ABOUT BLINDNESS (IE, TECHNOLOGY, SOCIAL ISSUES, ETC). AVERAGE CIRCULATION OF THE LARGE-PRINT VERSION OF THE BULLETIN WAS APPROXIMATELY 15,000 IN FY 2012. THE AUDIOCASSETTE VERSION, WHICH IS MADE AVAILABLE TO MEMBERS ONLY, HAD AN AVERAGE CIRCULATION OF 8,161 FOR THE FOUR ISSUES, A DECREASE OF 85 FROM THE PREVIOUS YEAR. THE PUBLICATION IS ALSO AVAILABLE FOR READING ON THE BVA WEBSITE AND BY EMAIL, UPON REQUEST, IN TWO DIFFERENT FORMATS. THE NUMBER OF BVA MEMBERS RECEIVING THE BULLETIN VIA EMAIL IS NOW 139, AN INCREASE OF 77 FROM FY 2011. THROUGH THE DONATED SERVICES OF NORTH AMERICAN PRECISION SYNDICATE (NAPS), BVA DISTRIBUTED A SERIES OF NEWSPAPER, RADIO, AND TV RELEASES HIGHLIGHTING ITS WORK. DURING FY 2012, BVA PRODUCED ONE 2-COLUMN NATIONAL NEWSPAPER RELEASE, ONE 1-COLUMN SPANISH LANGUAGE NEWSPAPER RELEASES, TWO NATIONAL RADIO RELEASES, TWO 30-SECOND NATIONAL TELEVISION RELEASES, AND ONE SPANISH RADIO RELEASE. BY VIRTUE OF THE HEAVILY DISCOUNTED PACKAGE SELECTED, THE ASSOCIATION RECEIVED ALL OF THE AFOREMENTIONED PRODUCTION AND DISTRIBUTION FOR A PAYMENT OF \$20,000. ALL OF THE RELEASES PROVIDED AN OUTLINE OF BVA'S MISSION, HISTORY, AND SERVICES, BUT THE LEAD-IN FOR EACH RELEASE DIFFERED FROM ONE TO THE NEXT. THE TOTAL VALUE OF THE DONATED MEDIA TIME AND SPACE FOR THE RELEASES AIRED AND PRINTED IN FY 2012, IF PAID FOR BY BVA IN THE FORM OF ADVERTISING, WAS \$981,888, AN INCREASE OF \$190,823 OVER FY 2011. NEWS RELEASES WERE AIRED OR PRINTED A TOTAL OF 2,270 TIMES THROUGHOUT THE UNITED STATES AND ITS TERRITORIES DURING THE FISCAL YEAR, AN INCREASE OF 622 OVER FY 2011. THE BVA WEBSITE ATTRACTED AN AVERAGE OF JUST OVER 260 VISITORS PER DAY IN FY 2012, WHICH IS A SIZEABLE INCREASE OF 34 ABOVE THE 226 VISITORS FOR FY 2011 AND 225 FOR FY 2010. A DISPROPORTIONATELY LARGE MAJORITY OF THE VISITS ORIGINATED THROUGH THE GOOGLE SEARCH ENGINE. OTHER SEARCH ENGINES CONTRIBUTED TO THE EFFORT BUT ON A MINIMAL SCALE. VERY FEW VISITS TO THE SITE CAME AS A RESULT OF LINKS ON OTHER SITES. THE BVA SITE IS A CONSTANT WORK IN PROGRESS THAT HAS MADE CONSISTENT IMPROVEMENTS BUT WHICH HAS CONSIDERABLE WORK AHEAD IN ORDER TO HELP THE ORGANIZATION FULFILL ITS MISSION IN THE 21ST CENTURY. BVA UTILIZES THREE DIFFERENT PRINT BROCHURES IN SPREADING ITS MESSAGE. ONE IS AN OLD AND INEXPENSIVE PAPER PIECE PRODUCED SOME 15 YEARS AGO. IT IS MOST HELPFUL FOR LARGE FAIRS, EXPOSITIONS, AND OTHER GATHERINGS INVOLVING THE GENERAL PUBLIC. UNLIKE THE FIRST, THE OTHER TWO PIECES ARE UPDATED WITH THE MOST CURRENT INFORMATION POSSIBLE. ONE IS A BROCHURE USED FOR FUNDRAISING PURPOSES, REACHING OUT TO OTHER VSOS AND TO OFFICES ON CAPITOL HILL. THE OTHER IS DESIGNED SPECIFICALLY TO INTEREST PROSPECTIVE MEMBERS. THEY WERE REVISED AND UPDATED IN FY 2011 AFTER DEPLETING THE EXISTING SUPPLY. SINCE FY 2010, BVA HAS MAINTAINED SOCIAL MEDIA ACCOUNTS ON MAJOR SITES SUCH AS FACEBOOK, TWITTER, AND YOUTUBE. OVER THE PAST THREE YEARS, BVA HAS ATTRACTED A LARGE FOLLOWING AND CURRENTLY COMMANDS A SOCIAL MEDIA AUDIENCE OF MORE THAN 3,000 FOLLOWERS. BVA USES THESE RESOURCES TO SPREAD INFORMATION TO ITS FOLLOWERS ABOUT THE ASSOCIATION'S ACTIVITIES, RECENT LEGISLATIVE NEWS, AND EDUCATION ABOUT ISSUES FACING BLIND PERSONS. SOCIAL MEDIA IS ALSO INSTRUMENTAL IN COORDINATING WITH PARTNER ORGANIZATIONS AND EDUCATING OUR FOLLOWERS ABOUT HELPFUL RESOURCES. BVA DISTRIBUTES DIRECT MAIL LITERATURE TO FRIENDS AND PROSPECTIVE SUPPORTERS THROUGHOUT THE COUNTRY AS PART OF ITS PUBLIC AWARENESS AND FUNDRAISING CAMPAIGNS. THERE ARE SEVERAL CALLS FOR ACTION IN EACH OF THE APPEALS, AND EACH IS INTENDED TO ENCOURAGE THE AUDIENCE TO GET DIRECTLY INVOLVED. THE FIRST IS A REQUEST FOR NAMES, ADDRESSES, AND TELEPHONE NUMBERS OF BLINDED VETERANS WHO MIGHT NEED ASSISTANCE. RESPONSES ARE PASSED ALONG TO BVA FIELD SERVICE REPRESENTATIVES FOR ACTION. THE SECOND IS A REQUEST FOR VOLUNTEERS TO DISTRIBUTE EDUCATIONAL LITERATURE IN THEIR RESPECTIVE COMMUNITIES. INFORMATIONAL BROCHURES ARE MAILED TO THOSE RESPONDING. THE THIRD IS A REQUEST TO READ "WHAT TO DO WHEN YOU SEE A BLIND PERSON" AND TO ACT ACCORDINGLY WHEN MEETING SUCH AN INDIVIDUAL. THERE IS A FOURTH CALL FOR ACTION IN SOME OF THE APPEALS. THIS IS A REQUEST FOR FRIENDS AND PROSPECTIVE DONORS TO WRITE A PERSONAL MESSAGE ON AN ENCLOSED GREETING CARD AND MAIL IT TO A BLINDED VETERAN. BVA RECEIVES THOUSANDS OF THESE CARDS AND FOR

Identifier	Return Reference	Explanation
		RWARDS THEM TO BLINDED VETERANS IN REHABILITATION CENTERS AROUND THE COUNTRY EACH CALL FO R ACTION IS IN SUPPORT OF BVA'S MISSION TO LOCATE AND ASSIST BLINDED VETERANS AND HELP THE M TAKE THEIR RIGHTFUL PLACES IN SOCIETY AND TO EDUCATE THE PUBLIC ABOUT BLINDNESS ISSUES RECIPIENT RESPONSES ARE RECORDED WHEN POSSIBLE BVA ALLOCATES A PORTION OF ITS DIRECT MAIL EXPENSES TO PUBLIC EDUCATION AND MANAGEMENT AND GENERAL ACCORDING TO THE AMERICAN INSTITU TE OF CERTIFIED PUBLIC ACCOUNTANTS STATEMENT OF POSITION (SOP) 98-2 BVA UNDERTAKES A PREL IMINARY ANALYSIS OF ITS ACTIVITIES TO DETERMINE IF THE PURPOSE, AUDIENCE, AND CONTENT CRIT ERIA ARE MET AND, IF SO, APPLIES A SYSTEMATIC, RATIONAL JOINT COST ALLOCATION METHODOLOGY BVA MAKES ITS FINANCIAL INFORMATION AVAILABLE TO THE GENERAL PUBLIC AND WATCHDOG AGENCIES BVA ADHERES TO THE REQUIREMENTS SET FORTH BY THE COMBINED FEDERAL CAMPAIGN, THE BETTER B USINESS BUREAU, AND GUIDESTAR.ORG BVA IS PROUD TO DISPLAY ITS SEAL AWARDED BY BBB AS AN A CCREDITED CHARITY BVA NATIONAL HEADQUARTERS DISTRIBUTES BROCHURES, EXTRA COPIES OF THE BU LLETIN, AND OVERRUNS FROM ITS DIRECT MAIL PIECES TO REGIONAL GROUPS AND INDIVIDUAL BLINDED VETERANS WHO ARE PARTICIPATING IN OUTREACH EFFORTS LOCALLY THE MAILING OF THE MATERIALS IS PARTICULARLY HEAVY IN THE EARLY AUTUMN AS BVA REGIONAL GROUPS PREPARE FOR WHITE CANE SA FETY AWARENESS DAY AND VETERANS DAY ACTIVITIES BLINDED VETERANS THROUGHOUT THE UNITED STA TES ARE FREQUENTLY INVOLVED IN PRESENTATIONS TO SCHOOLS, LOCAL CHAPTERS OF OTHER VSOS LOCA TED IN THEIR COMMUNITIES, AND LOCAL GROUPS SUCH AS LIONS AND ROTARY CLUBS AT THE ANNUAL C ONVENTION, BVA PRESENTS AWARDS AND CERTIFICATES TO HONOR INDIVIDUALS FOR THEIR OUTSTANDING ACHIEVEMENTS THE MAJOR GENERAL MELVIN J. MAAS ACHIEVEMENT AWARD IS PRESENTED TO A VETERA N WITH SERVICE-CONNECTED BLINDNESS WHO PROVES HIMSELF/HERSELF OUTSTANDING IN EMPLOYMENT PE RFORMANCE AND ADJUSTMENT TO DAILY LIVING THE DAVID L. SCHNAIR AWARD IS PRESENTED TO A VOL UNTEER FOR HIS/HER OUTSTANDING CONTRIBUTION TO THE BVA VOLUNTEER PROGRAM THE IRVING DIENE R AWARD IS PRESENTED TO THE BVA MEMBER WHO HAS MADE AN OUTSTANDING CONTRIBUTION TO THE GRO WTH AND DEVELOPMENT OF HIS/HER REGIONAL GROUP A CERTIFICATE OF APPRECIATION IS TO RECOGNI ZE INDIVIDUALS, GROUPS, AND EMPLOYERS WHO HAVE PROVIDED OUTSTANDING SERVICES TO BLINDED VE TERANS AND/OR TO THE BVA AT THE NATIONAL LEVEL IN FY 2012, THE MAAS AND THE SCHNAIR AWARD S AND ONE CERTIFICATE OF APPRECIATION WERE PRESENTED TO WELL DESERVING INDIVIDUALS

Identifier	Return Reference	Explanation
		C) ADVOCACY THE ASSOCIATION'S CONGRESSIONAL CHARTER DESIGNATES BVA AS THE ORGANIZATIONAL ADVOCATE FOR ALL BLINDED VETERANS BEFORE THE EXECUTIVE AND LEGISLATIVE BRANCHES OF GOVERNMENT THE BVA NATIONAL PRESIDENT, BOARD MEMBERS, AND NATIONAL HEADQUARTERS STAFF ARE INVITED TO PRESENT TESTIMONY BEFORE BOTH THE HOUSE AND SENATE COMMITTEES ON VETERANS AFFAIRS TO SHARE INFORMATION AND CONCERNS RELATED TO SPECIALIZED PROGRAMS AND SERVICES OFFERED BY THE VETERANS ADMINISTRATION (VA) TO VISUALLY IMPAIRED AND BLINDED VETERANS THEY ALSO MEET PERIODICALLY WITH MEMBERS OF CONGRESS, THEIR KEY STAFF, AND VA OFFICIALS TO INFORM THEM OF AND EDUCATE THEM ON THE UNIQUE AND SPECIAL NEEDS OF THE BLINDED AND VISUALLY IMPAIRED VETERANS IN AMERICA BVA'S EDUCATIONAL EFFORTS SEEK TO ENHANCE THE SPECIALIZED REHABILITATION PROGRAMS THAT ARE DESIGNED BY VA THE GOALS ARE TO ASSIST BLINDED VETERANS IN THE ACCEPTANCE OF AND ADJUSTMENT TO THE LOSS OF VISION AND TO ACQUIRE THE ADAPTIVE SKILLS NECESSARY TO BE SUCCESSFULLY REINTEGRATED INTO THEIR FAMILIES AND COMMUNITIES ACTIVE EFFORTS WERE CONTINUALLY MADE TO EDUCATE AND PROVIDE PERSPECTIVES TO FEDERAL AGENCIES AND LEGISLATION IN ORDER TO SECURE THE NECESSARY RESOURCES TO PROVIDE BLINDED VETERANS AND THEIR FAMILY MEMBERS WITH THE HEALTH CARE SERVICES AND BENEFITS THEY HAVE EARNED BVA CONTINUED TO BE VERY EFFECTIVE THIS PAST YEAR, PRESENTING BLINDED VETERANS' PRIORITY ISSUES BEFORE CONGRESS AND CONGRESSIONAL STAFF MEMBERS IN A VARIETY OF MEETINGS AND HEARINGS ASSOCIATION REPRESENTATIVES ALSO MET FREQUENTLY WITH OTHER VETERANS SERVICE ORGANIZATIONS (VSOS), DISABILITY ADVOCACY ASSOCIATIONS, AND REPRESENTATIVES FROM THE DEPARTMENT OF DEFENSE AND VA BVA'S NATIONAL PRESIDENT PRESENTED HIS ANNUAL TESTIMONY LEGISLATIVE UPDATES WERE SENT BY EMAIL TO THE BVA BOARD, STAFF, MEMBERS AND REGIONAL GROUPS NUMEROUS MEETINGS WITH VARIOUS CONGRESSIONAL OFFICES AND A VARIETY OF COMMITTEES WERE ATTENDED IN EFFORTS TO ACTIVELY MONITOR AND SUPPORT THE WIDE VARIETY OF LEGISLATION INTRODUCED IN CONGRESS THAT IMPACTS VETERANS AND THEIR FAMILIES BVA, IN CONCERT WITH THE OTHER MAJOR VSOS, WORKED DILIGENTLY THIS PAST YEAR ON PROVIDING INFORMATION NECESSARY TO ASSIST IN ENSURING THAT VA FY 2012-FY 2013 BUDGET WAS INCREASED TO MEET THE NEEDS OF VETERANS' HEALTH CARE PROGRAMS CONTINUED EFFORTS WERE DEVOTED THIS PAST YEAR TO THE DEPARTMENT OF DEFENSE'S (DOD) IMPLEMENTATION OF THE VISION CENTER OF EXCELLENCE (VCE) AND EYE TRAUMA REGISTRY AS A RESULT VCE HAS INCREASED DOD STAFFING TO TEN AND VA STAFFING TO FOUR FULL-TIME POSITIONS BVA CONTINUES TO RAISE AWARENESS FOR OIF AND OEF VETERANS WITH TRAUMATIC BRAIN INJURY VISUAL SYSTEM DYSFUNCTION TO ENSURE THAT SCREENING, DIAGNOSIS, TREATMENT, AND VISION RESEARCH ARE FUNDED BVA'S EFFORTS WERE INSTRUMENTAL IN SECURING CO-OPERATIONAL FUNDING FOR FY 2012- 2013 IN THE DEFENSE BUDGET FOR VCE EFFORTS TO FULLY IMPLEMENT THE DEFENSE VETERANS EYE INJURY VISION REGISTRY CONTINUE WORKING WITH THE NATIONAL ALLIANCE EYE VISION RESEARCH (NAEVR), BVA ATTENDED MEETINGS WITH KEY CONGRESSIONAL COMMITTEE MEMBERS AND KEY BUDGET STAFF WITH THE AIM OF INCREASING THE CONGRESSIONALLY DIRECTED MEDICAL RESEARCH PROGRAM FOR VISION BVA CONTINUES TO PRESS FOR ALTERNATIVE DEFENSE TRAUMATIC BRAIN INJURY (TBI) VISION RESEARCH PROGRAM FUNDING IN ADDITION TO VISION TRAUMA RESEARCH PROGRAM (VTRP) FUNDING BVA MONITORED THE WAITING TIMES, LENGTH OF STAYS, AND STAFFING FOR THE 13 EXISTING VA BLIND CENTERS TO ENSURE THE VETERANS ARE RECEIVING THE REHABILITATION AVAILABLE TO THEM BVA HAS ALSO BEEN ACTIVELY INVOLVED IN SPECIAL WORK GROUPS ESTABLISHED BY VA PROSTHETICS & SENSORY AIDS SERVICE (PSAS) TO DEVELOP PRESCRIPTION RECOMMENDATIONS AND SPECIFICATIONS FOR PROSTHETIC APPLIANCES FOR BLINDED VETERANS BVA IS ON THE VA WORK GROUP CHARGED WITH DEVELOPING VARIOUS SPECIFICATIONS AND THE ISSUANCE OF HANDBOOK RECOMMENDATIONS FOR COMPUTERS AND ADAPTIVE TECHNOLOGY DEVICES FOR BLINDED AND LOW -VISION VETERANS BVA WORKED TO HAVE THE BENEFICIARY TRAVEL SECTION OF THE U S CODE CHANGED TO INCLUDE TRAVEL BENEFITS TO ONE OF THE 13 REGIONAL BLIND REHABILITATION CENTERS FOR INPATIENT ADMISSION TO THOSE BLINDED VETERANS CURRENTLY NOT ELIGIBLE THESE EFFORTS CONTINUE WITH LEGISLATION INTRODUCED IN BOTH THE HOUSE AND THE SENATE, AND WITH FREQUENT MEETINGS WITH VA VETERANS TRAVEL PROGRAM OFFICIALS BVA HAS REQUESTED THAT VA COMPLY WITH SECTION 508 OF THE AMERICANS WITH DISABILITIES ACT BY MAKING ELECTRONIC VA MEDICAL RECORDS MORE ACCESSIBLE TO BLINDED VETERANS AND THOSE PROBLEMS OF ACCESS ARE ELIMINATED BVA CONTINUED ITS MANY VISITS WITH BLINDED OIF AND OEF SERVICE MEMBERS AND THEIR FAMILIES AT THE NEW WALTER REED NATIONAL MILITARY MEDICAL CENTER BVA CONTINUED TO LOCATE SERVICE MEMBERS AND RAISE FUNDS NEEDED FOR ELIGIBLE BLINDED VETERANS TO JOIN BVA'S OPERATION PEER SUPPORT (OPS) AND PROJECT GEMINI INITIATIVES A JOINED WITH OTHER VETERANS SERVICE ORGANIZATIONS IN A NUMBER OF PARTNERSHIPS BVA SUBMITS PERTINENT INFORMATION

Identifier	Return Reference	Explanation
		ON VA BLIND REHABILITATION SERVICES, OIF AND OEF EYE INJURIES, AND TBI VISION SYSTEM IMPAIRMENTS, THUS RAISING AWARENESS AND MAKING RECOMMENDATIONS ABOUT THESE INJURIES AND THE ISSUES SURROUNDING THEM. BVA ALSO PARTICIPATES WITH OTHER BLINDNESS ADVOCACY ORGANIZATIONS IN MEETINGS OF THE LEGISLATIVE WORKING GROUP (LWG) TO ASSURE THAT ALL BLIND INDIVIDUALS RECEIVE THE SERVICES AND ACCOMMODATIONS THEY DESERVE. BVA CONTINUES TO INCREASE PUBLIC AWARENESS AT ALL LEVELS REGARDING THE NEEDS OF BLINDED VETERANS AND THEIR FAMILIES, INCLUDING THOSE WHO HAVE EXPERIENCED TRAUMATIC BRAIN INJURY (TBI) AND SUBSEQUENT VISUAL DYSFUNCTION BY PROVIDING THE NEWS MEDIA WITH INFORMATION ON THE ISSUES SURROUNDING THESE VISION INJURIES. THESE EFFORTS HAVE RESULTED IN ARTICLES IN VARIOUS MEDIA OUTLETS. D) MEMBERSHIP BVA IS A MEMBERSHIP-DRIVEN ORGANIZATION. MEMBERSHIP IN BVA CONSTITUTES MEMBERSHIP IN THE NATIONAL ORGANIZATION AS WELL AS IN A LOCAL REGIONAL GROUP. ALTHOUGH IT IS NOT NECESSARY TO BE A MEMBER TO BENEFIT FROM MANY OF THE SERVICES BVA PROVIDES, MEMBERSHIP PROVIDES THE AUDIO VERSION OF THE QUARTERLY BVA BULLETIN THAT SO MANY MEMBERS FIND USEFUL IN ORDER TO REMAIN INFORMED. MEMBERSHIP ALSO PROVIDES OPPORTUNITIES TO MEET NEW PEOPLE FACING SIMILAR CHALLENGES, ESTABLISH FRIENDSHIPS, AND GAIN A VOICE AT THE ANNUAL CONVENTIONS. WITHOUT MEMBERSHIP, THE AFOREMENTIONED PROGRAMS WOULD NOT EXIST SINCE THEY HAVE BEEN ESTABLISHED BY MEMBERS AND DEVELOPED WITH THEIR NEEDS IN MIND. A BLINDED VETERAN CAN JOIN AS EITHER AN ANNUAL OR A LIFE MEMBER. BVA'S MEMBERSHIP TOTAL HAS GROWN STEADILY OVER THE PAST TWO DECADES. IN FY 2012, THERE WERE 632 NEW MEMBERS. FROM 1992 THROUGH 2012, THE ACTIVE MEMBERSHIP INCREASED FROM 7,252 TO AN ALL-TIME HIGH OF 11,455. THIS FIGURE REPRESENTS A LARGE NUMBER OF RENEWALS OF LAPSED MEMBERSHIPS AS WELL AS NEW MEMBERS THAT HAD NEVER BEFORE JOINED. ALL LIFE MEMBERSHIP DUES ARE DEPOSITED INTO A LIFE MEMBERSHIP FUND, WHICH IS MANAGED BY A LIFE MEMBERSHIP BOARD OF TRUSTEES APPOINTED BY THE NATIONAL PRESIDENT. THE DUES ARE INVESTED AND THE ANNUAL EARNINGS (INTEREST AND DIVIDENDS) ARE APPORTIONED TO THE REGIONAL GROUP BASED ON THE NUMBER OF LIFE MEMBERS IN EACH GROUP. BVA NATIONAL HEADQUARTERS DOES NOT BENEFIT FINANCIALLY AT ALL FROM THE LIFE MEMBERSHIP DUES BUT ONLY MANAGES, OR ADMINISTERS, THE FUND WITH THE ASSISTANCE OF THE BOARD OF TRUSTEES AND AN EXTERNAL PORTFOLIO MANAGER. IT IS A BOARD-DESIGNATED FUND. E) SCHOLARSHIP PROGRAM BVA'S KATHERN F. GRUBER SCHOLARSHIP PROGRAM COMPLETED ITS 29TH YEAR. THE SCHOLARSHIPS ARE OPEN TO A DEPENDENT CHILD, GRANDCHILD, OR SPOUSE OF A BLINDED VETERAN OR AN ACTIVE-DUTY BLINDED SERVICE MEMBER OF THE U.S. ARMED FORCES. THE BLINDNESS MAY BE EITHER SERVICE-CONNECTED OR NONSERVICE-CONNECTED. MEMBERSHIP IN BVA IS NOT A PREREQUISITE. FOR THE ACADEMIC YEAR 2011-12, THERE WERE SIX SCHOLARSHIPS OF \$2,000 EACH. THE THOMAS H. MILLER SCHOLARSHIP WAS ESTABLISHED BY THE BOARD IN FY 12 FOR 2012-2013 ACADEMIC YEAR. THE GUIDELINES ARE THE SAME AS THOSE ESTABLISHED FOR THE KATHERN F. GRUBER SCHOLARSHIP WITH MORE CONSIDERATION TOWARDS MUSIC AND FINE ARTS, IF APPLICABLE.

Additional Data

Software ID:
Software Version:
EIN: 53-0214281
Name: BLINDED VETERANS ASSOCIATION

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services
(Code) (Expenses \$ 246,290 including grants of \$ 12,150) (Revenue \$)
MEMBERSHIP AND SCHOLARSHIP PROGRAM