DATE	INVOICE NO.	COMMENT	AMOUNT	DISCOUNT	NET AMOUNT
07/26/12		Filing fee for Form 1023 filing	 NASADHHA -		
7//20/12		Timing received form 2020 timing	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			· .		
				TOTAL	

1633

THE KNOWLEDGE CENTER ON DEAFNESS, INC.

P.O. BOX 618 FRANKFORT, KY 40602 FARMERS BANK & CAPITAL TRUST COMPANY FRANKFORT, KENTUCKY 40601 73-61-839

Four Hundred Dollars and 00 cents

DATE

CHECK AMOUNT

July 27, 2012

\$ 400.00

TO THE ORDER OF

Internal Revenue Service

PO Box 192

Covington, KY 41012

#001633# #083900619#

27 7062 B#

Samirity Eastings Included 1-1 Details r

				•		
	•					

Form 1023 Checklist

Schedule D Yes · No ✓

(Revised June 2006)

Application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code

Note. Retain a copy of the completed Form 1023 in your permanent records. Refer to the General Instructions regarding Public Inspection of approved applications.

Chack each hav to finish your application (Form 1022). Sand this completed Chacklet with your filled in

	cation. If you have not answered all the items below, your application may be returned to you as
	nplete.
\checkmark	Assemble the application and materials in this order:
	Form 1023 Checklist
	• Form 2848, Power of Attorney and Declaration of Representative (if filing)
	• Form 8821, Tax Information Authorization (if filing)
	Expedite request (if requesting)
	 Application (Form 1023 and Schedules A through H, as required)
	Articles of organization
	 Amendments to articles of organization in chronological order
	Bylaws or other rules of operation and amendments
	Documentation of nondiscriminatory policy for schools, as required by Schedule B
	• Form 5768, Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation (if filing)
	 All other attachments, including explanations, financial data, and printed materials or publications. Label each page with name and EIN.
√	User fee payment placed in envelope on top of checklist. DO NOT STAPLE or otherwise attach your check or money order to your application. Instead, just place it in the envelope.
✓	Employer Identification Number (EIN)
✓	Completed Parts I through XI of the application, including any requested information and any required Schedules A through H.
	 You must provide specific details about your past, present, and planned activities. Generalizations or failure to answer questions in the Form 1023 application will prevent us from recognizing you as tax exempt.
	 Describe your purposes and proposed activities in specific easily understood terms. Financial information should correspond with proposed activities.
✓	Schedules. Submit only those schedules that apply to you and check either "Yes" or "No" below.
	Schedule A Yes No Schedule E Yes No V
	Schedule B Yes No V Schedule F Yes No V
	Schedule C Yes No Schedule G Yes No V

Schedule H Yes ___ No ✓

- An exact copy of your complete articles of organization (creating document). Absence of the proper purpose and dissolution clauses is the number one reason for delays in the issuance of determination letters.
 - Location of Purpose Clause from Part III, line 1 (Page, Article and Paragraph Number) Pg1, 3rd Article, 3rd
 - Location of Dissolution Clause from Part III, line 2b or 2c (Page, Article and Paragraph Number) or by operation of state law

 Pg1, 9th Article
- Signature of an officer, director, trustee, or other official who is authorized to sign the application.
 - Signature at Part XI of Form 1023.
- Your name on the application must be the same as your legal name as it appears in your articles of organization.

Send completed Form 1023, user fee payment, and all other required information, to:

Internal Revenue Service P.O. Box 192 Covington, KY 41012-0192

If you are using express mail or a delivery service, send Form 1023, user fee payment, and attachments to:

Internal Revenue Service 201 West Rivercenter Blvd. Attn: Extracting Stop 312 Covington, KY 41011

om 1023

(Rev. June 2006) Department of the Treasury Internal Revenue Service

Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code

OMB No. 1545-0056

Note: If exempt status is

Note: If exempt status is approved, this application will be open for public inspection.

Use the instructions to complete this application and for a definition of all **bold** items. For additional help, call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. Visit our website at **www.irs.gov** for forms and publications. If the required information and documents are not submitted with payment of the appropriate user fee, the application may be returned to you.

Attach additional sheets to this application if you need more space to answer fully. Put your name and EIN on each sheet and identify each answer by Part and line number. Complete Parts 1 - XI of Form 1023 and submit only those Schedules (A through H) that apply to you.

Par	Identification of Applicant				
1	Full name of organization (exactly as it appears in your organizing	document)	2 c/o Name (if applica	able)	· · · · · · · · · · · · · · · · · · ·
Nati	onal Association of State Agencies of the Deaf and Hard of H				
3	Mailing address (Number and street) (see instructions)	Room/Suite	4 Employer Identification N	umber (EIN)	
PO	Box 45301		27-29	69298	
	City or town, state or country, and ZIP + 4		5 Month the annual account	ting period end	ls (01 - 12)
Olyı	npia, WA 98504-5301		12		
6	Primary contact (officer, director, trustee, or authorized repres	entative)			
	a Name: Eric Raff, Director		b Phone: 36	60-915-5835	;
			c Fax: (optional)	360-902-0	855
	Are you represented by an authorized representative, such as a provide the authorized representative's name, and the name an representative's firm. Include a completed Form 2848, Power of Representative, with your application if you would like us to continuous to the continuous continuous and the continuous	d address of t f Attorney and mmunicate wit	the authorized Declaration of h your representative.	☐ Yes	✓ No
8	Was a person who is not one of your officers, directors, trusteer representative listed in line 7, paid, or promised payment, to he the structure or activities of your organization, or about your fin provide the person's name, the name and address of the person promised to be paid, and describe that person's role.	ip plan, mana ancial or tax n	ge, or advise you about natters? If "Yes,"	☐ Yes	☑ No
9a	Organization's website: to be determined (tbd)				
b	Organization's email: (optional) tbd				
10	Certain organizations are not required to file an information retuare granted tax-exemption, are you claiming to be excused from "Yes," explain. See the instructions for a description of organization of 990-EZ.	m filing Form 9	990 or Form 990-EZ? If		☑ No
11	Date incorporated if a corporation, or formed, if other than a co	orporation. (I	MM/DD/YYYY) 06	/ 18 /	2010
12	Were you formed under the laws of a foreign country? If "Yes," state the country.	······································		☐ Yes	☑ No
For I	Paperwork Reduction Act Notice, see page 24 of the instructions.	Cat.	. No. 17133K	Form 1023	(Rev. 6-2006)

Corm	1000 (Day 6 2006) Nome: N	ational Association of State Agen	cies o/t Deaf and HH EIN: 27 – 29	96929	8	Pa	ıge 2
Par							
You	must be a corporation (includin	g a limited liability company), an ur form unless you can check "Yes	nincorporated association, or a trust on lines 1, 2, 3, or 4.	to be	tax ex	empt.	
1	Are you a cornoration? If "Yes	s," attach a copy of your articles of state agency. Include copies of any	incorporation showing certification	Z	Yes		No
2	certification of filing with the app	propriate state agency. Also, if you ac	f your articles of organization showing lopted an operating agreement, attach ire they show state filing certification. ile its own exemption application.		Yes	Z	No
3	Are you an unincorporated as constitution, or other similar or include signed and dated copi	ssociation? If "Yes," attach a copy ganizing document that is dated ares of any amendments.	of your articles of association, nd Includes at least two signatures.		Yes	V	No
	and dated copies of any amen	ch a signed and dated copy of you diments.			Yes	Z	No
		explain how you are formed without			Yes		No No
5	Have you adopted bylaws ? If how your officers, directors, or	"Yes," attach a current copy showl r trustees are selected.	ng date of adoption. If "No," explain	√	res	<u> </u>	
	t III Required Provisions	s in Your Organizing Documer					·····
to m	eet the organizational test under so not meet the organizational test. I nal and amended organizing docur	ection 501(c)(3). Unless you can check DO NOT file this application until you ments (showing state filing certification	ation, your organizing document contain the boxes in both lines 1 and 2, your o a have amended your organizing docu if you are a corporation or an LLC) with our exempt purpose(s), such as chari	rganiz iment your	ing doci . Submi applicat	ument t your	
•	religious, educational, and/or s meets this requirement. Descri-	scientific purposes. Check the box ibe specifically where your organizing do	to confirm that your organizing docung document meets this requirement cument. Refer to the instructions for d Paragraph): Pg1, 3rd Article, 3rd	ment t, suc exem	h as 1pt	<u></u>	
	for exempt purposes, such as confirm that your organizing doc dissolution. If you rely on state i	haritable, religious, educational, and/ cument meets this requirement by ex aw for your dissolution provision, do	your remaining assets must be used e or scientific purposes. Check the box of press provision for the distribution of a not check the box on line 2a and go t	on iine ssets o line	upon 2c.	Z	
2b	If you checked the box on line Do not complete line 2c if you	2a, specify the location of your di checked box 2a. Pg1, 9th Articl	ssolution clause (Page, Article, and F	Paragi	raph).		
2c	See the instructions for inform	ation about the operation of state I law for your dissolution provision a	aw in your particular state. Check th	is bo	x if	Z	
Pa		on of Your Activities					
this i appli	nformation in response to other paid cation for supporting details. You like to this parrative. Bemember tha	arts of this application, you may summ may also attach representative copies t if this application is approved. It will	narrative. If you believe that you have a arize that information here and refer to of newsletters, brochures, or similar do be open for public inspection. Therefore tions for information that must be inclu-	ne sp cumer , your	ecinc pa its for si narrativ	aris oi upport re	ing
Pa	Compensation and Employees, and Ind	Other Financial Arrangements lependent Contractors	s With Your Officers, Directors,	Trus	stees,		
1a	List the names, titles, and mailir total annual compensation, or pother position. Use actual figure	ng addresses of all of your officers, d	irectors, and trustees. For each persor ces to the organization, whether as an pensation is or will be paid. If addition what to include as compensation.	officei	r, empic	yee, o	or ,
Name	•	Title	Mailing address		pensatior ual actual		
	ve Florio, RICDHH	President	One Capitol Hill, Ground Level Providence, RI 02908			N	lone
She	erri Collins, ACDHH	Vice-President	100 N. 15th Ave, Suite 104			N	lone

Name	Title	Mailing address	(annual actual or estimated)
Steve Florio, RICDHH	President	One Capitol Hill, Ground Level Providence, RI 02908	None
		100 N. 15th Ave, Suite 104	None
Sherri Collins, ACDHH	Vice-President	Phoenix, AZ 85007	HOITE
	2301		None
Jan Withers, NCDHHS	Secretary	Raleigh, NC 27699-2301	Rolle
Virginia Moore, KCDHH	Treasurer	632 Versailles Road	None
Virginia Woote, Noban	Treasurer	Frankfort, KY 40601	
	B . I (D)	PO Box 45301	- None
Eric Raff, ODHH	Board of Directors - at large	Olympia, WA 98504-5301	Notic

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

Name		Title	Mailing address		ensation Il actual		
n/a		n/a	n/a				n/a
	receive compensation of more than \$50,000 per year. Use the actual figure, if ave information on what to include as compensation. Do not include officers, directors into the include as compensation. Do not include officers, directors into the include as compensation. List the names, names of businesses, and mailing addresses of your five highest that receive or will receive compensation of more than \$50,000 per year. Use the instructions for information on what to include as compensation. Title Mailing address into Mailing addresses of your five highest instructions for information on what to include as compensation. Title Mailing address into Mailing address into the instructions for information on what to include as compensation. Title Mailing address into Mailing address into the instructions for information on what to include as compensation. Title Mailing address into Mailing address into the instructions for information on what to include as compensated independent compensated employees, and highest compensated independent contractors listed on lines into 1 to 1 to through far relationships? If "Yes," identify the individuals and explain the relationship. For each of your officers, directors, or trustees related to your highest compensated independent contractors listed on lines into 1 to 1 to 1 through far relationships? If "Yes," identify the individuals and explain the relationship. For each of your officers, directors, trustees, highest compensated employees, and compensated independent contractors listed on lines in, it, or 1c, attach a list qualifications, average hours worked, and duties. Do any of your officers, directors, trustees, highest compensated employees, and compensated independent contractors listed on lines in, it, or 1c receive component or admitted independent contractors listed on lines in, it, or 1c receive component or admitted independent contractors listed on lines in the practices of the compensation arrangement. In establishing the compensation for your officers, direc			W-1	•		
•		Title Mailing address (n/a) n/a					
							
	List the names names of hu	sinesses and malling addre		ondor	t cont	rooto	
Ū	that receive or will receive or	mpensation of more than \$	50,000 per year. Use the actual figure, if avail				15
Name					ensation		
n/a	 		·····	(G) II IQIC	ir actual	or estin	
ıva		III d			<u></u>		n/a
The f	ollowing "Yes" or "No" questions tors, trustees, highest compensa	s relate to <i>past, present, or pla</i> ted employees, and highest o	anned relationships, transactions, or agreements wo	/ith you s 1a. 1	ur office	ers, 1c.	
2a	Are any of your officers, direc	ctors, or trustees related to	each other through family or business	— <u> </u>	Yes		No
	Do you have a business rela through their position as an	tionship with any of your of officer, director, or trustee?	ficers, directors, or trustees other than If "Yes," identify the individuals and describe		Yes	Z	No
С	highest compensated indepe	ndent contractors listed on	lines 1b or 1c through family or business		Yes	Z	No
3a	compensated independent c	ontractors listed on lines 1a					
b	compensated independent c other organizations, whether control? If "Yes," identify the	ontractors listed on lines 1a tax exempt or taxable, tha individuals, explain the re	i, 1b, or 1c receive compensation from any tare related to you through common ationship between you and the other		Yes	Z	No
4	employees, and highest comfollowing practices are recor	pensated independent con nmended, although they are	tractors listed on lines 1a, 1b, and 1c, the				
b	Do you or will you approve of	compensation arrangements		V	Yes Yes Yes		No No No

orm	1023 (Rev. 6-2006) Name: National Association of State Agencies o/t Deaf and HH EIN: 27 29			Pa	ge 4
Par	Compensation and Other Financial Arrangements With Your Officers, Directors, Employees, and Independent Contractors (Continued)	Trus	tees,		
d	Do you or will you record in writing the decision made by each individual who decided or voted on compensation arrangements?	V	Yes		No
е	Do you or will you approve compensation arrangements based on Information about compensation paid by similarly situated taxable or tax-exempt organizations for similar services, current compensation surveys compiled by independent firms, or actual written offers from similarly situated organizations? Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.	V	Yes		No
f	Do you or will you record in writing both the information on which you relied to base your decision and its source?	V	Yes		No
g	If you answered "No" to any item on lines 4a through 4f, describe how you set compensation that is reasonable for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c.				
5a	Have you adopted a conflict of interest policy consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," answer lines 5b and 5c.	V	Yes		No
b	What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you for setting their own compensation?				
С	What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you regarding business deals with themselves?				
	Note: A conflict of Interest policy is recommended though it is not required to obtain exemption. Hospitals, see Schedule C, Section I, line 14.				
6a	Do you or will you compensate any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, or 1c through non-fixed payments, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are determined, who is eligible for such arrangements, whether you place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.		Yes	Ø	No
b	Do you or will you compensate any of your employees, other than your officers, directors, trustees, or your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year, through non-fixed payments, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are or will be determined, who is or will be eligible for such arrangements, whether you place or will place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.		Yes	Z	No
7a	Do you or will you purchase any goods, services, or assets from any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a; 1b, or 1c? If "Yes," describe any such purchase that you made or intend to make, from whom you make or will make such purchases, how the terms are or will be negotiated at arm's length, and explain how you determine or will determine that you pay no more than fair market value. Attach copies of any written contracts or other agreements relating to such purchases.		Yes	Z	No
b	Do you or will you sell any goods, services, or assets to any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such sales that you made or intend to make, to whom you make or will make such sales, how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you are or will be paid at least fair market value. Attach copies of any written contracts or other agreements relating to such sales.		Yes	Z	No
8a	Do you or will you have any leases, contracts, loans, or other agreements with your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," provide the information requested in lines 8b through 8f.		Yes	Z	No
c d e	Describe any written or oral arrangements that you made or intend to make. Identify with whom you have or will have such arrangements. Explain how the terms are or will be negotiated at arm's length. Explain how you determine you pay no more than fair market value or you are paid at least fair market value. Attach copies of any signed leases, contracts, loans, or other agreements relating to such arrangements.				
9a	Do you or will you have any leases, contracts, loans, or other agreements with any organization in which any of your officers, directors, or trustees are also officers, directors, or trustees, or in which any individual officer, director, or trustee owns more than a 35% interest? If "Yes," provide the information requested in lines 9b through 9f.		Yes	V	No

Name: National Associatio	n of State	Agencies of Deal	and HH EIN	. 27 2969298
Maille: Hutional Associatio	n or orare	ngenera or bear	COLCULIA IN INC.	. 21 - 2000201

Form 1023 (Rev. 6-2006) Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- b Describe any written or oral arrangements you made or intend to make.
- c Identify with whom you have or will have such arrangements.
- d Explain how the terms are or will be negotiated at arm's length.
- e Explain how you determine or will determine you pay no more than fair market value or that you are paid at least fair market value.
- f Attach a copy of any signed leases, contracts, loans, or other agreements relating to such arrangements.

Par	rt VI Your Members and Other Individuals and Organizations That Receive Benefits F	rom	You		
The sof yo	following "Yes" or "No" questions relate to goods, services, and funds you provide to individuals and o our activities. Your answers should pertain to <i>past, present,</i> and <i>planned</i> activities. (See Instructions.)			as pa	art
	In carrying out your exempt purposes, do you provide goods, services, or funds to individuals? If "Yes," describe each program that provides goods, services, or funds to individuals.	Z	Yes		No
b	In carrying out your exempt purposes, do you provide goods, services, or funds to organizations? If "Yes," describe each program that provides goods, services, or funds to organizations.	Z	Yes		No
2	Do any of your programs limit the provision of goods, services, or funds to a specific individual or group of specific individuals? For example, answer "Yes," if goods, services, or funds are provided only for a particular individual, your members, individuals who work for a particular employer, or graduates of a particular school. If "Yes," explain the limitation and how recipients are selected for each program.		Yes	V	No
3	Do any individuals who receive goods, services, or funds through your programs have a family or business relationship with any officer, director, trustee, or with any of your highest compensated employees or highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c? If "Yes," explain how these related individuals are eligible for goods, services, or funds.		Yes	Z	No
	rt VII Your History				
The :	following "Yes" or "No" questions relate to your history. (See instructions.)				
1	Are you a successor to another organization? Answer "Yes," If you have taken or will take over the activities of another organization; you took over 25% or more of the fair market value of the net assets of another organization; or you were established upon the conversion of an organization from for-profit to non-profit status. If "Yes," complete Schedule G.		Yes	√	No
2	Are you submitting this application more than 27 months after the end of the month in which you were legally formed? If "Yes," complete Schedule E.		Yes	Z	No
	rt VIII Your Specific Activities				
The answ	following "Yes" or "No" questions relate to specific activities that you may conduct. Check the appropried wers should pertain to past, present, and planned activities. (See instructions.)	iate b	юх. Үс	our	
1	Do you support or oppose candidates in political campaigns in any way? If "Yes," explain.		Yes	Z	No
2a	Do you attempt to influence legislation? If "Yes," explain how you attempt to influence legislation and complete line 2b. If "No," go to line 3a.	Z	Yes		No
b	Have you made or are you making an election to have your legislative activities measured by expenditures by filing Form 5768? If "Yes," attach a copy of the Form 5768 that was already filed or attach a completed Form 5768 that you are filing with this application. If "No," describe whether your attempts to influence legislation are a substantial part of your activities. Include the time and money spent on your attempts to influence legislation as compared to your total activities.		Yes	. 🔽	No
3a	Do you or will you operate bingo or gaming activities? If "Yes," describe who conducts them, and list all revenue received or expected to be received and expenses paid or expected to be paid in operating these activities. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data.		Yes	V	No
b	Do you or will you enter into contracts or other agreements with individuals or organizations to conduct bingo or gaming for you? If "Yes," describe any written or oral arrangements that you made or intend to make, identify with whom you have or will have such arrangements, explain how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you pay no more than fair market value or you will be paid at least fair market value. Attach copies or any written contracts or other agreements relating to such arrangements.		Yes	Ø	No
C	List the states and local jurisdictions, including Indian Reservations, in which you conduct or will conduct gaming or bingo.				

Page 5

	1023 (Rev. 6-2006) Name: National Association of State Agencies o/t Deaf and HH EIN: 27 - 29	6929	8	Paç	је <u>6</u>
	t VIII Your Specific Activities (Continued) Do you or will you undertake fundraising? If "Yes," check all the fundraising programs you do or will	7	Yes		No
4a	conduct. (See instructions.)	<u></u>			
	✓ mail solicitations □ phone solicitations □ accept donations on your website				
	✓ email solicitations ☐ accept donations on your website ☐ personal solicitations ☐ receive donations from another organization's	web	site		
	□ vehicle, boat, plane, or similar donations □ government grant solicitations				
	✓ foundation grant solicitations ☐ Other	-			
	Attach a description of each fundraising program.	_		131	
b	Do you or will you have written or oral contracts with any individuals or organizations to raise funds for you? If "Yes," describe these activities. Include all revenue and expenses from these activities and state who conducts them. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data. Also, attach a copy of any contracts or agreements.		Yes		No
С	Do you or will you engage in fundraising activities for other organizations? If "Yes," describe these arrangements. Include a description of the organizations for which you raise funds and attach copies of all contracts or agreements.		Yes	\square	No
d	List all states and local jurisdictions in which you conduct fundralsing. For each state or local jurisdiction listed, specify whether you fundralse for your own organization, you fundralse for another organization, or another organization fundralses for you.				
е	Do you or will you maintain separate accounts for any contributor under which the contributor has the right to advise on the use or distribution of funds? Answer "Yes" if the donor may provide advice on the types of investments, distributions from the types of investments, or the distribution from the donor's contribution account. If "Yes," describe this program, including the type of advice that may be provided and submit copies of any written materials provided to donors.		Yes		No
5	Are you affiliated with a governmental unit? If "Yes," explain.	V	Yes		No
	Do you or will you engage in economic development? If "Yes," describe your program.		Yes	Z	No
b	Describe in full who benefits from your economic development activities and how the activities promote exempt purposes.				
7a	Do or will persons other than your employees or volunteers develop your facilities? If "Yes," describe each facility, the role of the developer, and any business or family relationship(s) between the developer and your officers, directors, or trustees.		Yes	Ø	Νo
b	Do or will persons other than your employees or volunteers manage your activities or facilities? If "Yes," describe each activity and facility, the role of the manager, and any business or family relationship(s) between the manager and your officers, directors, or trustees.		Yes	Ø	No
С	If there is a business or family relationship between any manager or developer and your officers, directors, or trustees, identify the individuals, explain the relationship, describe how contracts are negotiated at arm's length so that you pay no more than fair market value, and submit a copy of any contracts or other agreements.				
8	Do you or will you enter into joint ventures , including partnerships or limited liability companies treated as partnerships, in which you share profits and losses with partners other than section 501(c)(3) organizations? If "Yes," describe the activities of these joint ventures in which you participate.		Yes	Z	No
9a	Are you applying for exemption as a childcare organization under section 501(k)? If "Yes," answer lines 9b through 9d. If "No," go to line 10.		Yes	V	No
b	Do you provide child care so that parents or caretakers of children you care for can be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k).		Yes		No
С	Of the children for whom you provide child care, are 85% or more of them cared for by you to enable their parents or caretakers to be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k).		Yes		No
d	Are your services available to the general public? If "No," describe the specific group of people for whom your activities are available. Also, see the instructions and explain how you qualify as a childcare organization described in section 501(k).		Yes		No
0	Do you or will you publish, own, or have rights in music, literature, tapes, artworks, choreography, scientific discoveries, or other intellectual property? If "Yes," explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed.	Ø	Yes		No

	1023 (Rev. 6-2006) Name: National Association of State Agencies o/t Deaf and HH EIN: 27 - 29	6929	8	Pa	ge 7
Par	t VIII Your Specific Activities (Continued)				
11	Do you or will you accept contributions of: real property; conservation easements; closely held securities; intellectual property such as patents, trademarks, and copyrights; works of music or art; licenses; royalties; automobiles, boats, planes, or other vehicles; or collectibles of any type? If "Yes," describe each type of contribution, any conditions imposed by the donor on the contribution, and any agreements with the donor regarding the contribution.		Yes	V	No
12a	Do you or will you operate in a foreign country or countries? If "Yes," answer lines 12b through 12d. If "No," go to line 13a.		Yes	Z	No
b	Name the foreign countries and regions within the countries in which you operate.				
	Describe your operations in each country and region in which you operate.				
	Describe how your operations in each country and region further your exempt purposes.				
13a	Do you or will you make grants, loans, or other distributions to organization(s)? If "Yes," answer lines 13b through 13g. If "No," go to line 14a.	Z	Yes		No
b	Describe how your grants, loans, or other distributions to organizations further your exempt purposes.				
C	Do you have written contracts with each of these organizations? If "Yes," attach a copy of each contract.		Yes	\mathbf{Z}	No
đ	Identify each recipient organization and any relationship between you and the recipient organization.				
e	Describe the records you keep with respect to the grants, loans, or other distributions you make.				
ı	Describe your selection process, including whether you do any of the following: (i) Do you require an application form? If "Yes," attach a copy of the form.	г	Yes		No
	(ii) Do you require a grant proposal? If "Yes," describe whether the grant proposal specifies your responsibilities and those of the grantee, obligates the grantee to use the grant funds only for the purposes for which the grant was made, provides for periodic written reports concerning the use of grant funds, requires a final written report and an accounting of how grant funds were used, and acknowledges your authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused.		Yes		No
g	Describe your procedures for oversight of distributions that assure you the resources are used to further your exempt purposes, including whether you require periodic and final reports on the use of resources.				
14a	Do you or will you make grants, loans, or other distributions to foreign organizations? If "Yes," answer lines 14b through 14f. If "No," go to line 15.		Yes	Z	No
þ	Provide the name of each foreign organization, the country and regions within a country in which each foreign organization operates, and describe any relationship you have with each foreign organization.				
С	Does any foreign organization listed in line 14b accept contributions earmarked for a specific country or specific organization? If "Yes," list all earmarked organizations or countries.		Yes		No
d	Do your contributors know that you have ultimate authority to use contributions made to you at your discretion for purposes consistent with your exempt purposes? If "Yes," describe how you relay this information to contributors.		Yes		No
е	Do you or will you make pre-grant inquiries about the recipient organization? If "Yes," describe these inquiries, including whether you inquire about the recipient's financial status, its tax-exempt status under the Internal Revenue Code, its ability to accomplish the purpose for which the resources are provided, and other relevant information.		Yes		No
f	Do you or will you use any additional procedures to ensure that your distributions to foreign organizations are used in furtherance of your exempt purposes? If "Yes," describe these procedures, including site visits by your employees or compliance checks by impartial experts, to verify that grant funds are being used appropriately.		Yes		No

Form	1023 (Rev. 6-2006) Name: National Association of State Agendics of Board and The Line			90 0
Pa	rt VIII Your Specific Activities (Continued)			
15	Do you have a close connection with any organizations? If "Yes," explain.	☐ Yes	Z	No
16	Are you applying for exemption as a cooperative hospital service organization under section 501(e)? If "Yes," explain.	☐ Yes	V	No
17	Are you applying for exemption as a cooperative service organization of operating educational organizations under section 501(f)? If "Yes," explain.	☐ Yes		No
18	Are you applying for exemption as a charitable risk pool under section 501(n)? If "Yes," explain.	Yes	<u>/</u>	No
19	Do you or will you operate a school? If "Yes," complete Schedule B. Answer "Yes," whether you operate a school as your main function or as a secondary activity.	☐ Yes	Z	No
20	Is your main function to provide hospital or medical care? If "Yes," complete Schedule C.	Yes	V	No
21	Do you or will you provide low-income housing or housing for the elderly or handicapped? If "Yes," complete Schedule F.	☐ Yes	Z	No
22	Do you or will you provide scholarships, fellowships, educational loans, or other educational grants to individuals, including grants for travel, study, or other similar purposes? If "Yes," complete Schedule H.	☐ Yes	Z	No
	Note: Private foundations may use Schedule H to request advance approval of individual grant procedures.			

Part IX Financial Data

For purposes of this schedule, years in existence refer to completed tax years. If in existence 4 or more years, complete the schedule for the most recent 4 tax years. If in existence more than 1 year but less than 4 years, complete the statements for each year in existence and provide projections of your likely revenues and expenses based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. If in existence less than 1 year, provide projections of your likely revenues and expenses for the current year and the 2 following years, based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. (See instructions:)

				of Revenues and			
		Type of revenue or expense	Current tax year	3 prior tax	years or 2 succeedin	· · · · · · · · · · · · · · · · · · ·	
			(a) From 1/1/12 To 12/31/12	(b) From 1/1/11 To 12/31/11	(c) From 1/1/10 To 12/31/10	(d) From	(e) Provide Total for (a) through (d)
	1	Gifts, grants, and contributions received (do not include unusual grants)	\$3,500	****	\$4,000		\$7,500
	2	Membership fees received			7.,000		77,500
	3	Gross Investment income			***		
	4	Net unrelated business income					
	5	Taxes levied for your benefit					
Revenues	6	Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)					
Rev	7	Any revenue not otherwise listed above or in lines 9-12 below (attach an itemized list)					
	8	Total of lines 1 through 7	\$3,500		\$4,000		\$7,500
	9	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)					,
	10	Total of lines 8 and 9	\$3,500	MARK	\$4,000		\$7,500
	11	Net gain or loss on sale of capital assets (attach schedule and see instructions)					
	12	Unusual grants					
	13	Total Revenue Add lines 10 through 12	\$3,500	at What has	\$4,000		\$7,500
	14	Fundraising expenses					The state of the s
	15	Contributions, gifts, grants, and similar amounts paid out (attach an itemized list)					D. C.
	16	Disbursements to or for the benefit of members (attach an itemized list)	\$2,155	***************************************	\$2,989		ANTICAL PROPERTY.
Expenses	17	Compensation of officers, directors, and trustees					
ĕ	18	Other salaries and wages					· ·
翼	19	Interest expense					ND 0.55
_	20	Occupancy (rent, utilities, etc.)					
	21	Depreciation and depletion	 				
	22	Professional fees					
	23	Any expense not otherwise classified, such as program services (attach itemized list)	400		198		
	24	Total Expenses Add lines 14 through 23	\$2,555		\$3,187		

Page	10

Name: National Association of State Agencies o/t D	eaf and HH 🛭 E	IN: 27	_ 2969298
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Form 1023 (Rev. 6-2006) Part IX Financial Data (Continued) Year End: 2011 B. Balance Sheet (for your most recently completed tax year) (Whole dollars) Assets 813 1 2 2 3 4 Bonds and notes receivable (attach an itemized list) 5 Corporate stocks (attach an itemized list) 5 6 ß 7 8 Depreciable and depletable assets (attach an itemized list) 8 9 9 10 10 11 Total Assets (add lines 1 through 10) 11 813 12 12 13 Contributions, gifts, grants, etc. payable 13 14 Mortgages and notes payable (attach an itemized list) 14 15 15 0 16 Total Liabilities (add lines 12 through 15) 16 **Fund Balances or Net Assets** 17 Total fund balances or net assets . 17 813 Total Liabilities and Fund Balances or Net Assets (add lines 16 and 17) 18 18 Have there been any substantial changes in your assets or liabilities since the end of the period ☐ Yes ☑ No shown above? If "Yes," explain. **Public Charity Status** Part X Part X is designed to classify you as an organization that is either a private foundation or a public charity. Public charity status is a more favorable tax status than private foundation status. If you are a private foundation, Part X is designed to further determine whether you are a private operating foundation. (See instructions.) √ No Are you a private foundation? If "Yes," go to line 1b. If "No," go to line 5 and proceed as instructed. Yes If you are unsure, see the instructions. b As a private foundation, section 508(e) requires special provisions in your organizing document in addition to those that apply to all organizations described in section 501(c)(3). Check the box to confirm that your organizing document meets this requirement, whether by express provision or by reliance on operation of state law. Attach a statement that describes specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document or by operation of state law. See the instructions, including Appendix B, for information about the special provisions that need to be contained in your organizing document. Are you a private operating foundation? To be a private operating foundation you must engage Yes ☐ No directly in the active conduct of charitable, religious, educational, and similar activities, as opposed to indirectly carrying out these activities by providing grants to individuals or other organizations. If "Yes," go to line 3. If "No," go to the signature section of Part XI. Have you existed for one or more years? If "Yes." attach financial information showing that you are a private ☐ Yes ☐ No operating foundation; go to the signature section of Part XI. If "No," continue to line 4. Have you attached either (1) an affidavit or opinion of counsel, (including a written affidavit or opinion ☐ No Yes from a certified public accountant or accounting firm with expertise regarding this tax law matter), that sets forth facts concerning your operations and support to demonstrate that you are likely to satisfy the requirements to be classified as a private operating foundation; or (2) a statement describing your proposed operations as a private operating foundation? If you answered "No" to line 1a, indicate the type of public charity status you are requesting by checking one of the choices below. You may check only one box. The organization is not a private foundation because it is: a 509(a)(1) and 170(b)(1)(A)(i)—a church or a convention or association of churches. Complete and attach Schedule A. b 509(a)(1) and 170(b)(1)(A)(ii)—a school. Complete and attach Schedule B. \Box 509(a)(1) and 170(b)(1)(A)(iii)—a hospital, a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital. Complete and attach Schedule C. -an organization supporting either one or more organizations described in line 5a through c, f, g, or h or a publicly supported section 501(c)(4), (5), or (6) organization. Complete and attach Schedule D.

orm	1023 (Rev. 6-2006) Name; National Association of State Agencies of Deaf and HH EIN: 27 = 2969298	Page 11
Par	t X Public Charity Status (Continued)	
	509(a)(4)—an organization organized and operated exclusively for testing for public safety. 509(a)(1) and 170(b)(1)(A)(iv)—an organization operated for the benefit of a college or university that is owned or operated by a governmental unit.	
g	509(a)(1) and 170(b)(1)(A)(vi)—an organization that receives a substantial part of its financial support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public.	\mathbf{Z}
h	509(a)(2)—an organization that normally receives not more than one-third of its financial support from gross Investment Income and receives more than one-third of its financial support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions).	
i	A publicly supported organization, but unsure if it is described in 5g or 5h. The organization would like the IRS to decide the correct status.	
6	If you checked box g, h, or i in question 5 above, you must request either an advance or a definitive ruling by selecting one of the boxes below. Refer to the instructions to determine which type of ruling you are eligible to receive.	
а	Request for Advance Ruling: By checking this box and signing the consent, pursuant to section 6501(c)(4) of the Code you request an advance ruling and agree to extend the statute of limitations on the assessment of excise tax under section 4940 of the Code. The tax will apply only if you do not establish public support status at the end of the 5-year advance ruling period. The assessment period will be extended for the 5 advance ruling years to 8 years, 4 months, and 15 days beyond the end of the first year. You have the right to refuse or limit the extension to a mutually agreed-upon period of time or issue(s). Publication 1035, Extending the Tax Assessment Period, provides a more detailed explanation of your rights and the consequences of the choices you make. You may obtain Publication 1035 free of charge from the IRS web site at www.irs.gov or by calling toll-free 1-800-829-3676. Signing this consent will not deprive you of any appeal rights to which you would otherwise be entitled. If you decide not to extend the statute of limitations, you are not eligible for an advance ruling.	
	For Organization (Signature of Officer, Director, Trustee, or other authorized official) (Type or print title or authority of signer)	
	For IRS Use Only	
	IRS Director, Exempt Organizations (Date)	
b	Request for Definitive Ruling: Check this box if you have completed one tax year of at least 8 full months and you are requesting a definitive ruling. To confirm your public support status, answer line 6b(i) if you checked box g in line 5 above. Answer line 6b(ii) if you checked box h in line 5 above. If you checked box i in line 5 above, answer both lines 6b(i) and (ii).	
	(i) (a) Enter 2% of line 8, column (e) on Part IX-A. Statement of Revenues and Expenses	Z
	(ii) (a) For each year amounts are included on lines 1, 2, and 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each disqualified person. If the answer is "None," check this box.	
	(b) For each year amounts are included on line 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each payer, other than a disqualified person, whose payments were more than the larger of (1) 1% of line 10, Part IX-A. Statement of Revenues and Expenses, or (2) \$5,000. If the answer is "None," check this box.	
7	Did you receive any unusual grants during any of the years shown on Part IX-A. Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual.	☑ No

_{me:} National	Association	of State	Agencies	o/t Deaf	and HH	EIN;	27	2969298
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(Type or print name of signer)

Board of Director at large
(Type or print title or authority of signer)

Part XI User Fee Information You must include a user fee payment with this application. It will not be processed without your paid user fee. If your average annual gross receipts have exceeded or will exceed \$10,000 annually over a 4-year period; you must submit payment of \$750. If your gross receipts have not exceeded or will not exceed \$10,000 annually over a 4-year period, the required user fee payment is \$300. See instructions for Part XI, for a definition of gross receipts over a 4-year period. Your check or money order must be made payable to the United States Treasury. User fees are subject to change. Check our website at www.lrs.gov and type "User Fee" in the keyword box, or call Customer Account Services at 1-877-829-5500 for current information. ☐ No Yes Have your annual gross receipts averaged or are they expected to average not more than \$10,000? If "Yes," check the box on line 2 and enclose a user fee payment of \$300 (Subject to change—see above). If "No," check the box on line 3 and enclose a user fee payment of \$750 (Subject to change—see above). Check the box if you have enclosed the reduced user fee payment of \$300 (Subject to change). Check the box if you have enclosed the user fee payment of \$750 (Subject to change). I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete. Please 8/13/12 Eric Raff

Reminder: Send the completed Form 1023 Checklist with your filled-in-application.

tor, Trustee, or other

Form 1023 (Rev. 6-2006)

Sign

Here

(Signature of Officer,

authorized official)

Form 1023 (Rev. 6-2006)

(Date)

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National Association of State Agencies of the Deaf and Havd of Hearing EIN: 27-2969298

Delaware

-RECEIVED-JUL 0 1 2010 ODHH

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF INCORPORATION OF "NATIONAL

ASSOCIATION OF STATE AGENCIES OF THE DEAF AND HARD OF HEARING",

FILED IN THIS OFFICE ON THE EIGHTEENTH DAY OF JUNE, A.D. 2010,

AT 1:35 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

4838243 8100

100670832

AUTHENTICATION: 8077934

DATE: 06-24-10

You may verify this certificate online at corp.delaware.gov/authver.shtml



-RECEIVED... JUL 0 1 2010 ODHH

PAGE :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NATIONAL ASSOCIATION OF STATE

AGENCIES OF THE DEAF AND HARD OF HEARING" IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JUNE, A.D.

2010.

4838243 8300

100670832

AUTHENTYCATION: 8077935

DATE: 06-24-10

You may verify this certificate online at corp. delaware.gov/authver.shtml

JUN/18/2010/FR1 10:32 AM DSHS - ODHH

FAX No. 360-902-0855

3, 002

State of Delaware Secretary of State Division of Corporations Delivered 01:35 PM 06/18/2010 FILED 01:35 PM 06/18/2010 SRV 100670832 - 4838243 FILE

STATE of DELAWARE CERTIFICATE of INCORPORATION A NON-STOCK CORPORATION

-RECEIVED-JUL 0 1 2010 ODHH

Articles of Incorporation of the National Association of State Agencies of the Deaf and Hard of Hearing

The undersigned, a majority of whom are citizens of the United States, desiring to form a Non-Profit Corporation under the Non-Profit Corporation Law of Delaware, do hereby certify:

First: The name of the Corporation shall be the National Association of State Agencies of the Deaf and Flard of Hearing.

Second: Its Registered Office in the State of Delaware is to be located at DODHH, 4425 North Market Street in the City of Wilmington County of New Castle Zip Code 19802-1307. The name of the registered agent is Loretta Sarro.

Third: The purpose of the Corporation is to engage in any lawful act of activity for which corporations may be organized under the General Corporation Law of Delaware. This Corporation shall be a nonprofit corporation.

The purpose of the Association is to function as the national voice of state agencies serving Deaf and Hard of Hearing people and promote the implementation of best practices in the provision of services.

Sald corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the internal Revenue Code, or the corresponding section of any future federal tax code.

Fourth: The Corporation shall not have any capital stock.

Fifth: The conditions of membership shall be stated in the by-laws.

Sixth: The names and addresses of the persons who are the initial trustees of the corporation are as follows:

Loretta Sarro, Public Information Officer	Rebecca J. Rosenthal, Executive Director
c/o Delaware Office for the Deaf and Hard of	c/o Kansas Commission for the Deaf and
Hearing	Hard of Hearing
Division of Vocational Rehabilitation	915 SW Harrison Street
4425 North Market Street	Docking State Office Building, 9 N
Wilmington, DE 19802-1307	Topeka, Kansas 66612
Steven A. Florio, Executive Director c/o Rhode Island Commission on the Deaf and Hard of Hearing One Capitol Hill, Ground Level Providence, RI 02908	Eric Raff, Director c/o Office of the Deaf and Hard of Hearing P:O. Box 45301 Olympia, WA 98503-5301

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Seventh: The name and mailing address of the incorporator are as follows:

Erlo Raff; Director c/o Office of the Deaf and Hard of Hearing PO Box 45301 Olympia, WA 98504-5301

Eighth: No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article Third hereof. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Nineth: Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

In witness whereof, we have hereunto subscribed our names this 11th day of June 2010.

Print Name	Signature
Loretta Sarro	Shorta 9. Sam
Rebecca J. Rosenthal	Mx herendy places there
Steven A. Florio	8-2-
Erlo Raff	Eric Roff

I, The Undersigned, for the purpose of forming a corporation under the laws of the State of Delaware, do make, file and record this Certificate, and do certify that the facts herein stated are true, and I have accordingly hereunto set my hand this 11th day of June 2010.

BY: Evic Robb

NAME: Eric Raff

By-Laws of the National Association of State Agencies of the Deaf and Hard of Hearing, A Not-For-Profit Corporation

ARTICLE I - NAME

§ 1.01 – Name. The name of the corporation shall be the National Association of State Agencies of the Deaf and Hard of Hearing. Hereinafter in these by-laws shall be referred to as "NASADHH." It shall be a nonprofit organization incorporated under the laws of the State of Delaware.

ARTICLE II - PURPOSE and OBJECTIVE

§ 2.01 – Purpose. The Purpose of the NASADHH is to function as the national voice of state agencies serving Deaf and Hard of Hearing persons and to promote the implementation of best practices in the provision of services.

§ 2.02 - Objectives. The Objective of the NASADHH is established as follows:

- ✓ To increase public awareness through research, education, and informational activities about the ability and capacity of persons who are deaf or hard of hearing and promote their independence.
- ✓ To provide resources and consulting to improve equal access opportunities to effective communication.
- ✓ To create best practices in the federal, state, and local provision of services.
- ✓ To provide a forum for administrators of state agencies to study, deliberate, and act upon matters affecting services to deaf and hard of hearing persons.
- ✓ To establish and maintain liaison with federal agencies and national non-profit organizations as they develop policies and administer programs affecting services to deaf and hard of hearing persons.
- ✓ To be a voice on public policies and strategic initiatives to improve programs and services to deaf and hard of hearing persons.
- ✓ To collaborate with other national and state organizations that are serving deaf and hard
 of hearing persons to promote the common causes.

ARTICLE III - OFFICES

§ 3.01 – Mailing Address. The mailing address shall be the state agency of the incumbent Administrator elected as Secretary.

- § 4.01 Eligibility. An Agency Administrator such as manager or director of a state government commission, department, division or office of the deaf and hard of hearing that support the purpose statement in Article II PURPOSE and OBJECTIVE shall be eligible for membership. Membership is automatically granted after receipt of annual dues as defined in Section § 4.02 of this Article IV MEMBERSHIP.
- § 4.02 Annual Dues. The amount of annual dues for each calendar year shall be determined by the agency's budget, unless changed by a simple majority vote of the members at a meeting of the full membership. The dues shall be payable by December 31st and membership with voting is based on the following fiscal year.

Agency Budget	Annual Dues
\$1,000,001 or more	\$ 150
\$1,000,000 or les s	\$100

- § 4.03 Representation of State Agencies. The "Agency Administrator" shall be entitled to represent the state agency in the NASADHH and to cast a single vote of the state agency. The Agency Administrator shall enjoy full privileges of participation in all meetings and other activities of the NASADHH. When the Agency Administrator is unable to represent the agency on or before the NASADHH, s/he shall have the right to designate a subordinate from within the agency to represent the agency, who shall enjoy the full rights and privileges of the Agency Administrator except for the purpose of serving as an officer.
- § 4.04 Changes Respecting State Agencles. In the event of any significant change within a state agency or in the event of a change of its Agency Administrator, it shall be the duty of the state agency to notify a member of the Board of Directors of such change, as well as of changes of address and related matters.
- § 4.05 Authority of Membership. The Membership of the NASADHH shall have authority to elect the Board of Directors and Officers and to vote on any proposal of merger, consolidation or dissolution of the NASADHH.

ARTICLE V - FISCAL YEAR

§ 5.01 – Fiscal Year. The fiscal year of the NASADHH shall be the period from January 1st to December 31st.

ARTICLE VI - MEETINGS

§ 6.01 – Biennial Meetings. The biennial meeting of the members shall take place every evennumbered year. The specific date, time and location will be designated by the Board of Directors. Any meeting of the members may take place on any odd-numbered year if the financial condition and resources allowed and approved by the majority of the members of state agencies.

- § 6.02 Communication Access at Meetings. American Sign Language and English will be utilized all the times on all NASADHH meetings. Certified interpreters and CART services shall be arranged as soon as the meeting date and location are determined. Any additional accommodation at request shall be considered and provided to ensure equal participation of every member at the meeting.
- § 6.03 Special Membership Meetings. Such meetings of the NASADHH may be called by the President with the approval of the majority of the Board of Directors. The place of the special meeting shall be determined by the Board of Directors.
- § 6.04 Notice of Membership Meetings. Notice of all meetings shall be given at least ninety (90) days prior to the biennial meeting by sending a tentative agenda to each member of state agency at its last known contact information through electronic mail correspondences. No other business but that specified in the notice may be transacted at such special meeting without the 2/3 majority of all present at such meeting.
- § 6.05 Meetings of the Board of Directors. At least thirty (30) days' notice of all meetings of the Board of Directors shall be given by the President. When time does not permit such notice, the Board of Directors may conduct a meeting by means of a conference call through telephone/videophone/online video conference or an electronic mail correspondence in order to deal with matters deserving the immediate attention of the Board of Directors provided that a quorum participates in the telephone/videophone/online video conference and the electronic mail correspondences and minutes of such conferences or correspondences are taken, preserved, and distributed to the membership no later than 8 weeks.
- § 6.06 Quorum. (a) A Quorum of all meetings shall consist of a simple majority of the members of state agencies. The term "member in good standing" means a member of state agency whose dues have been paid as provided for in Article IV MEMBERSHIP. (b) A Quorum at all meetings of the Board of Directors shall consist of a simple majority of the members of the Board of Directors.
- § 6.07 Minutes. Minutes of all meetings of the membership and of the Board of Directors shall be taken, preserved, and distributed to all members of state agencies no later than 8 weeks.
- § 6.08 Rules of Order. Meetings shall be conducted in accordance with the provisions of the latest edition of Robert's Rules of Order, except that if any requirements of Robert's Rules of Order are in conflict with a provision of the by-laws of the NASADHH, the by-laws shall prevail.

ARTICLE VII - VOTING

§ 7.01 – Meetings. At all meetings, except for the election of officers and board of directors, all votes shall be by raising a hand. For election of officers and board of directors, ballots shall be provided and there shall not have place requiring identification of the person casting the vote, unless, the unanimous consent of all present at such meeting take place to approve the certain form of voting other than the ballot.

§ 7.02 – Inspectors of Election. At any regular or special meeting, if a majority so requires, any question may be voted upon in the manner and style provided for election of officers and board of directors. At all votes by ballot, the President of such meeting shall, prior to the commencement of balloting, appoint a committee of three who shall act as "Inspectors of Election" and who shall, at the conclusion of such balloting, certify in writing to the President, the results and the certified copy shall be physically affixed in the minute book to the minutes of that meeting.

No "Inspector of Election" shall be a candidate for office or shall be personally interested in the question voted upon.

ARTICLE VIII - ORDER OF BUSINESS

- § 8.01 Order of Business. At the biennial meeting of the NASADHH the following items of business shall be dealt with and shall be deemed ordinary business:
- 1. Roll Call.
- 2. Reading of the Minutes of the preceding meeting(s).
- 3. Reports of the Officers.
- 4. Reports of Committees.
- 5. Unfinished Business.
- 6. New Business.
- 7. Election of Officers and At-Large Board of Directors
- 8. Announcements
- 9. Adjournments.

ARTICLE IX - BOARD OF DIRECTORS

- § 9.01 Management. The business of NASADHH shall be managed by a Board of Directors consisting of 7 members, including the officers of NASADHH as defined in ARTICLE X OFFICERS.
- § 9.02 Members and Terms. Four (4) officers of the Board of Directors shall serve a 2-year term with unlimited terms. Three (3) at-large Board of Directors to be chosen for the ensuing year shall be elected at the biennial meeting of NASADHH in the same manner and style as the officers of NASADHH and they shall serve for a term of 2 4 years. When the NASADHH bylaws are ratified, one member of at-large Board of Directors will serve 2 years in the first term and two members of at-large Board of Directors will serve 4 years in the first term. It will be staggered with one member and two members at a time after the first 2-year term expires.

- § 9.03 Powers and Authority. The Board is responsible for overall policy and direction of the NASADHH. The Board shall have the control and management of the affairs and business of NASADHH, including gifts, contracts, investments, deeds, real estates, bequests, and other legible transactions and deals. The Executive Committee that only consists of the elected officers as defined in Section §10.01 of Article X OFFICERS shall have all powers and authority of the Board of Directors in the intervals between meetings of the Board of Directors.
- § 9.04 At-Large Board's Duties. 3 At-Large Board of Directors shall conduct the duties as follows:

The At-Large Board of Directors (3)

- The At-Large Board of Directors shall perform the duties as may be assigned by the Board of Directors.
- The At-Large Board of Directors shall exercise and assist in accordance with the Section § 9.03 to ensure adequate resources to carry out missions and goals of the NASADHH.
- § 9.05 Call for Meeting. Such Board of Directors shall only act in the name of NASADHH when it shall be regularly convened by its President after due notice to all the directors of such meeting.
- § 9.06— Quorum of Board of Directors. Five (5) members of the Board of Directors shall constitute a quorum and the meetings of the Board of Directors shall be held at least 1 time every calendar year as determined by the Board of Directors.
- § 9.07- Voting. Each director shall have one vote and such voting may be done by proxy through electronic or other effective and prompt communication means prior to adjournment of all meetings if the quorum is satisfied as defined in Section §9.06.
- § 9.08 Rules and Regulations. The Board of Directors may make such rules and regulations covering its meetings as it may in its discretion determine necessary.
- § 9.09 Compensations. No member of the Board of Directors shall not receive any salary or compensation from the NASADHH for services rendered to the NASADHH as members of the Board, except that the members of the Board of Directors may be reimbursed for expenses incurred in the performance of their duties to the NASADHH, in reasonable amounts based on policies approved by the Board.
- § 9.10 Conflicts of Interest. Whenever a member of the Board of Directors including the officer has a financial or personal interest in any matter coming before the board of directors, the board shall ensure that:
 - 1. The interest of such member of the Board of Directors is fully disclosed to the board of directors.
 - 2. No interested member of the Board of Directors may vote or lobby on the matter or be counted in determining the existence of a quorum at the meeting of the board of directors at which such matter is voted upon.

3. Any transaction in which a member of the Board of Directors has a financial or personal interest shall be duly approved by members of the board of directors not so interested or connected as being in the best interests of the organization.

4. Payments to the interested member of the Board of Directors shall be reasonable and shall not exceed fair market value in accordance with terms of agreement ratified by the

Board of Directors.

5. The minutes of meetings at which such votes are taken shall record such disclosure, abstention, and rationale for approval.

- § 9.11 Vacancies. Vacancies, except the officers of the NASADHH, in the Board of Directors shall be filled by a vote of the simple majority of the remaining members of the Board of Directors for the balance of the year.
- § 9.12 Resignation. Except as otherwise required by law, a member of the Board of Directors may resign from the Board at any time by giving notice in writing to the Board. Such resignation shall take effect at the time specified therein, and unless otherwise specified therein, no acceptance of such resignation shall be necessary to make it effective.
- § 9.13 Removal of the at-large member of the Board of Director. An at-large member of the Board of Director may be removed by a 2/3 majority vote of the Board of Directors, when sufficient cause exists for such removal (a serious violation of the Section § 9.10 as an example.) at any regularly scheduled or special meeting of the Board of Directors, whenever in its judgment the best interest of the NASADHH would be served thereby. Removal of the Officer is defined under the Section §10.05.

ARTICLE X - OFFICERS

§ 10.01 - Officer's Duties. The officers of the NASADHH shall consist of the following:

President
Vice President
Secretary
Treasurer

A. The President

The President shall preside at all membership and board meetings.

- The President shall develop meeting agenda of all meetings including executive committee and biennial meeting.
 The President shall present at each biennial meeting of the NASADHH a biennial report of the work of the NASADHH. Unless, otherwise as defined in Section 1 of Article VI – MEETINGS.
- The President shall appoint all committees, temporary or permanent and shall be an ex-officio member to all committees.
- The President shall oversee all books, reports and certificates required by law are properly kept or filed.

- The President shall be one of the officers who may sign the checks or drafts of the NASADHH.
- The President shall have such powers as may be reasonably construed as belonging to the chief executive of any organization.
- The President represents the NASADHH wherever such official representation is needed.

B. The Vice- President

The Vice President shall in the event of the absence or inability of the President to exercise his/her office become acting president of the NASADHH with all the rights, privileges and powers as if s/he had been the duly elected president.

The Vice-President shall perform such other duties as may be assigned by the Board
of Directors.

C. The Secretary

The Secretary shall keep the minutes and records of the NASADHH in appropriate books.

- It shall be his/her duty to file any certificate required by any statute, federal or state.
- The Secretary shall give and serve all notices to members of the NASADHH.
- The Secretary shall be the official custodian of the records and seal of the NASADHH.
- The Secretary may be one of the officers required to sign the checks and drafts of the NASADHH.
- The Secretary shall present to the membership at any meetings any communication addressed to him/her as Secretary of the organization.
- The Secretary shall submit to the Board of Directors any communications which shall be addressed to him/her as Secretary of the NASADHH.
- The Secretary shall attend to all correspondence of the organization and shall exercise all duties incident to the office of Secretary.
- The Secretary shall perform such other duties as may be assigned by the Board of Directors.

D. The Treasurer

The Treasurer shall have the care and custody of all monles belonging to the NASADHH and shall be solely responsible for such monles or securities of the NASADHH.

- The Treasurer shall be authorized to deposit in a bank or similar institutions.
- The Treasurer shall cause to be deposited in a regular business bank or trust company a sum not exceeding \$ 10,000 and the balance of the funds of the NASADHH shall be deposited in a savings bank except that the Board of Directors may cause such funds to be invested in such investments as shall be legal for a nonprofit corporation in the State of Delaware.

- The Treasurer must be one of the officers who shall sign checks or drafts of the
 organization. No special fund may be set aside that shall make it unnecessary for the
 Treasurer to sign the checks issued upon it.
- The Treasurer shall render at stated periods as the Board of Directors shall determine a written account of the finances of the NASADHH and such report shall be physically affixed to the minutes of the Board of Directors of such meeting.
- The Treasurer shall exercise all duties incident to the office of Treasurer.
- The Treasurer shall perform such other duties as may be assigned by the Board of Directors.
- § 10.02 Order of Succession. Whenever a vacancy exists in the office of the President, s/he shall be succeeded in office by an elected officer of the NASADHH in the order in which the officers appear in Section §10.01 of Article X- OFFICERS.
- § 10.03 Officers and Board of Directors. The officers shall by virtue of their office be members of the Board of Directors.
- § 10.04 Vacancies. Any vacancy in any office other than the office of president because of succession, death, resignation, removal, disqualification or otherwise, shall be filled by election at any meeting of the members by a simple majority vote of those present and voting thereon. Only those casting an affirmative or negative vote shall be considered as voting thereon. Nominations shall be from the floor.

The president may, in his/her discretion appoint an "Agency Administrator" to fill an exiting vacancy in an elective office with the approval from the Board of Directors. Such "Agency Administrator" shall serve as an officer until any election can be held at the next successive regular meeting of the membership.

- § 10.05 Removal of Officers. Any officer of the NASADHH may be removed by the Board of Directors whenever, in its judgment, the best interests of the NASADHH would be served thereby. Notice of such removal shall be given to the members and the action shall be subject to review and ratification or repeal by the full membership, acting in a regular meeting or through e-mail ballot, if an e-mail ballot is requested in writing by at least five (5) members.
- § 10.06 Terms of Officers. The term of all elective officers of the NASADHH shall be for a period of two years. The term of office shall commence immediately following the conclusion of the biennial election of officers. An individual may, however, be re-elected for any successive number of terms of office.
- § 10.07 Ratification. Any and all actions of the Board of Directors may be reviewed and ratified, disaffirmed or rescinded in whole or in part at any subsequent meeting of the members by a majority vote of those present and voting thereon. Only those casting an affirmative or negative vote shall be considered as voting thereon.

ARTICLE XI - SALARIES

§ 11.01 – Salaries. The Board of Directors shall hire and fix the compensation of any and all employees which they in their discretion may determine to be necessary for the conduct of the business of the NASADHH and ratified at the biennial meeting.

ARTICLE XII - COMMITTEES

- § 12.01 Committee Formation. All committees of the NASADHH shall be appointed by the President with approval from the Board of Directors and their term of office shall be for a period of 2 years or less if sooner terminated by the action of the Board of Directors and as needed, such as fundraising, public relations, data collection, etc.
- § 12.02 Executive Committee. The four officers serve as the members of the Executive Committee. Except for the power to amend the Articles of Incorporation and bylaws, the Executive Committee shall have the powers and authority of the board of directors in the Intervals between meetings of the board of directors, and is subject to the direction and control of the full board.
- § 12.03 Finance Committee. The treasurer is the chair of the Finance Committee, which includes two other board members and one agency administrator who is not the member of the Board. The Finance Committee is responsible for developing and reviewing fiscal policies and procedures, investment plan, fundraising plans, and the annual budget with staff and/or other board members. The board must approve the budget and all expenditures must be within budget. Annual reports are required to be submitted to the board showing income, expenditures, and pending income. The financial records of the NASADHH are public information and shall be made available to the membership, board members, and the public.

ARTICLE XIII - ELECTIONS

§ 13.01 - Biennial Elections. At the regular meeting of the membership of the NASADHH on the even-numbered years, the following officers and Board of Directors shall be elected:

A. President

E: At-Large Board member

B. Vice-President

F: At-Large Board member

C: Secretary

G: At-Large Board member

D: Treasurer

- § 13.02 Eligibility. Any "Agency Administrator" representing a state agency in good standing, in accordance with Section §4.02 of Article IV MEMBERSHIP, shall be eligible to become a candidate for the office or the member of the Board of Directors in the NASADHH.
- § 13.03 Conduct of Election. As the final order of business prior to announcement or adjournment, the president shall call for nominations from the floor and nominations submitted prior to the election date. After the nominations for each office and board have closed, the election for that office and board shall ensue, and a simple majority of votes as defined in the Section §9.07 casting an affirmative or negative vote shall be required for successful election to office and board. Voting may be by secret ballot or by roll call vote as defined in the Section §9.07.

§14.01 - Indemnification. Every member of the Board of Directors, officer or employee of the NASADHH may be indemnified by the NASADHH against all expenses and liabilities, including counsel fees, reasonably incurred or imposed upon such members of the Board, officer or employee in connection with any threatened, pending, or completed action, suit or proceeding to which she/he may become involved by reason of her/his being or having been a member of the Board, officer, or employee of the NASADHH, or any settlement thereof, unless adjudged therein to be liable for negligence or misconduct in the performance of her/his duties. Provided, however, that in the event of a settlement the indemnification herein shall apply only when the Board approves such settlement and reimbursement as being in the **best** interest of the NASADHH. The foregoing right of indemnification shall be in addition and not exclusive of all other rights which such member of the Board, officer or employee is entitled.

ARTICLE XV - AMENDMENTS

§ 15.01 – Amendments. These By-Laws may be altered, amended, repealed or added to by an affirmative vote of not less than a 2/3 majority vote of the members present at the biennial meeting.

ARTICLE XVI - DISSOLUTION

§ 16.01 – Dissolution of Assets. If the NASADHH should be dissolved, its remaining assets, after payment of all debts and liabilities, shall be disbursed to the national non-profit organization(s) dedicated to better government and services on behalf of Deaf and Hard of Hearing persons under the internal Revenue Service Law, (1954- Tax Exempt Status 501 -C- 3) as determined by the Membership of the NASADHH as defined in Section § 4.05 of Article IV – MEMBERSHIP.

CERTIFICATION

These bylaws were approved and ratified at Hyatt Regency-Louisville in Louisville, KY, a meeting of the members of state agencies present at the biennial meeting by a 2/3 majority vote on July 2, 2012.

President

Date

Attachment to the Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code

EIN: 27-2969298

Additional Information

Part IV Narrative Description of Activities

Background information about the activities - Since the late 1990s, executive managers or directors of state agencies of the deaf and hard of hearing have held a loose network alliance. These executives have observed the chronic unmet needs of deaf, hard of hearing and deaf-blind with fragmented services lacking standards and a lack of adequate funding. A mutual consensus was reached to form a national association to address these disparities as well as the need for a venue to provide a public service to the general public by sharing its' past, present and future activities. All aforementioned activities are conducted periodically with states agencies volunteering their time along with in-kind contributions at no cost to the National Association of State Agencies of the Deaf and Hard of Hearing doing business as "NASADHH."

Past activities – Held informal biennial meetings to share accomplishments and discuss shared issues facing deaf, hard of hearing and deaf-blind constituents. Updated the annual "Directory of State Agencies Serving Deaf and Hard of Hearing" led by Michigan and Washington State in the past and recently, Kansas. Conducted national surveys posing questions related to organizational hierarchy within government, structure of advisory or decision-making boards, funding sources and budgets, executive salaries and number of employees, and type of services provided led by Michigan and recently, Rhode Island. The directory and survey is available to the general public. Maintained a listsery administered by Kansas and currently, North Carolina to pose inquiries regarding legislation, issues, and service delivery best practices.

Present activities – Continuation of biennial meetings, directory, surveys and listserv maintenance. Establishment of two workgroups with various states participating to research and disseminate findings regarding standards pertinent to interpreting and access to healthcare. Establishing a website including domain name, hosting, and development with Arizona and Washington State as the lead.

Future activities — Establish a national information clearinghouse inclusive of answers to common requests for information and referral. Develop best practices or quality standards of delivery systems. Draft position statements on issues pertinent to deaf, hard of hearing and deaf-blind constituents.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

EIN: 27-2969298

1a "List the names, titles and mailing addresses of all of your officers, directors and trustees. For each person listed, state their total annual compensation, or proposed compensation, for all services to the organization, whether as an officer, employee or other employee."

Name	Title	Mailing address	Compensation amount
Dee Clanton, ODHH	Board of Directors -	21 South Fruit Street, Suite 200	None
·	at large	Concord, NH 03301	
Ernest Garrett III,	Board of Directors -	1500 Southridge Drive Suite 201	None
мсрнн	at large	Jefferson City, MO 65109	

3a "...attach a list showing their name, qualifications, average hours worked, and duties."

As identified in Part V, 1a, the Board of Directors and Officers are executive administrators of their state's agency of the deaf and hard of hearing. All of them have degrees ranging from bachelors to doctorate, 2+ years of experience providing direct services, knowledge and expertise pertinent to deaf, hard of hearing and deaf-blind. Their duties as members of the Board of Directors and officers are stipulated in the bylaws and performed accordingly with no compensation. As volunteers, the average hours worked is minimal and varies among individual members.

5a "Have you adopted a conflict of interest policy consistent with the sample conflict of interest policy in Appendix A to the instructions? If 'Yes,' provide a copy of the policy..."

 \S 9.10 – Conflicts of interest (Article Nine, Section 10) is stipulated in the Bylaws which was adopted on July 2, 2012 by 2/3 vote of the general membership at the biennial meeting.

Part VI Your Members and Other Individuals and Organizations That Receive Benefits From You

1a "...to individuals? If 'Yes,' describe each program that provides goods, services, or funds to individuals."

National Clearinghouse: Resources including fact sheets, frequently asked questions, other resources and publications will be provided to people who are deaf, hard of hearing, deaf-blind, their family members, parents, professionals serving people with hearing loss and the general public in response to requests for information and referrals. It will include a directory and past surveys of state agencies of the deaf and hard of hearing.

1b "...to organizations? ? If 'Yes,' describe each program that provides goods, services, or funds to organizations."

Line 1b: National Clearinghouse: Technical assistance inclusive of national best practices/standards in service delivery, Americans with Disabilities Act provision of reasonable accommodations, national

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surveys, and other publications & resources will be provided to organizations, businesses, government agencies, and employers serving people who are deaf, hard of hearing or deaf-blind.

Part VIII Your Specific Activities

2a "If 'Yes,' explain how you attempt to influence legislation and..."

NASADHH has not attempted to influence legislation within its past and present activities. NASADHH does not anticipate in engaging in a substantial amount of legislative activities. Any anticipated attempt to influence legislation will be limited to issues pertinent to deaf, hard of hearing and deaf-blind as well as people with disabilities. Issues would include protecting and advancing the civil rights of people with disabilities or promoting access to services and technology.

2b "If 'No,' describe whether your attempts to influence legislation are a substantial part of your activities. Include the time and money spent on your attempts to influence legislation as compared to your total activities."

Attempts to influence legislation are not the primary focus of NASADHH activities. Legislation pertinent to people with hearing loss or all people with disabilities is occasional and infrequent. The percentage of total time and total funds spent on legislative activities should not exceed more than 5% during any given tax year. The planned activity is to have the NASADHH Board and legislative committee to focus on and influence legislation only if its' state members have a consensus. NASADHH would release 'Position Statements' on legislative bills, send letters to elected officials, and issue 'Legislative Alerts' to the general public regarding the status of legislative bills. Due to infrequency of such specific legislation, little time will be spent by volunteers in drafting letters and position statements to be approved by the general membership. However, some state agencies of the deaf and hard of hearing are limited by their respective states' rules regarding lobbying and will abstain from participating. NASADHH intend to identify these states. Cost incurred will be limited to printing and postage. NASADHH will avoid use of professional lobbyists.

4d "List all states and local jurisdiction in which you conduct fundraising."

At this time, fundraising is limited to solicitations for sponsorships from national businesses to enable biennial meetings. NASADHH will conduct fundraising for itself in all of the 50 states whenever there is an opportunity to participate in a fundraising activity or event within that state. NASADHH will comply with any state's registration and reporting requirements pertinent to fundraising.

5 "Are you affiliated with a governmental unit? If "Yes," explain

To define NASADHH being affiliated with "governmental units," currently 39 states have a state commission, department, division, or office of the deaf and hard of hearing within the state government organizational hierarchy. Each state agency is headed by an administrator, a manager or an executive director who are representatives on the NASADHH. The NASADHH membership and its board of directors comprises of executive managers of these state agencies. NASADHH and the "governmental units" do not require financial reports or audits from each other. However, NASADHH as a separate

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independent entity will have its own financial reports and audits. NASADHH and its' affiliates does not have the power to tax, regulate or oversee each other.

10 "If 'Yes,' explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed."

NASADHH will own any intellectual property produced on behalf of NASADHH. Fees will not be charged however acknowledgment of NASADHH ownership will be required. Information packets may be copyright with a trademark logo to be created. Additionally, the trademark logo will brand NASADHH on marketing resources such as brochure and website.

13b, d, e, f, and g "Do you will you make grants, loans, or other distributions to organization(s)"

NASADHH will make applications, grants or distributions available to individuals and organizations that are implementing or researching service delivery best practices or conducting research pertinent to people with hearing loss. There have been no grants, loans and distributions to any recipient organization in past and present activities. Accordingly, there are no records at this time. For future activities, it is not anticipated NASADHH will be able to make grants, loans or distributions within the short-term horizon. Depending on progress of NASADHH organizational and fund development based on voluntary labor, NASADHH intend to develop policy & procedures regarding applications, grants and distributions.

Part X Public Charity Status

6b (i)(a) Line 8, column E on Part IX-A, Statement of Revenues and Expenses.

 $$7,500 \times .02 = 150

6b (i)(b) "Attach a list showing the name and amount contributed by each person, company, or organization whose gifts totaled more than the 2% amount."

Year	Name	Amount
2010	CSDVRS	\$1,500
	Sorenson Communication	\$700
	Purple Communication	\$1,800
		, v. •
2012	Purple Communication	\$1,200
	CaptionCall	\$1,800
	ZVRS	\$500

The National Association of State Agencies of the Deaf and Hard of Hearing Fiscal Agent: The Knowledge Center on Deafness, Inc. (KY) December 31, 2009 - June 30, 2012 (estimate)

Date Check of Check of Description Purpose(s) 06/10/10 DEP of CSDVRS-Donation of Commission/Deaf Service of ORMINICATION of DEP of Vision Communication of Orminication of Dep of Partner's Bank Credit Card of Lustomes, Postage & Marriott Hotel(NASADHH) 08/09/10 1540 of Vision Vision of Vision of Dep of Vision of Vision of Dep of Vision of Vi				-	NASADHH	ННО	
V CSDVRS-Donation V Sorenson Communication - Donation V Purple Communication V Farmer's Bank Credit Card V NASADHH Serivce CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges	Date	Check		Purpose(s)	Credit	Debit	Balance
V CSDVRS-Donation V Sorenson Communication - Donation V Purple Communication V Farmer's Bank Credit Card V NASADHH Serivce CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges							
V CSDVRS-Donation V Sorenson Communication - Donation V Purple Communication V Farmer's Bank Credit Card V NASADHH Serivce Purple Communication - Donation CaptionCall-Donation Hyatt Regency Charges							
V Sorenson Communication - Donation V Farmer's Bank Credit Card V NASADHH Serivce Purple Communication - Donation CaptionCall-Donation Hyatt Regency Charges	06/10/10	DFP	V CSDVRS-Donation	Commission/Deaf Service	1,500.00		
Purple Communication NASADHH Serivce Nasadh Serivce Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges	06/28/10	DEP	V Sorenson Communication - Donation	Commission/Deaf Service	700.00		
V Farmer's Bank Credit Card NASADHH Serivce Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges	07/20/10	品	V Purple Communication	Commission/Deaf Service	1,800.00		
V NASADHH Serivce Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges	08/09/10	1539	✓ Farmer's Bank Credit Card	Customes, Postage & Marriott Hotel(NASADHH)		-2,989.00	
Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges	08/09/10	1540	V NASADHH Serivce	Filing with State of Delaware		-198.00	
Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges							
Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges							
Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges					4,000.00	-3,187.00	
Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges							
Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges				Balance as of Dec. 31, 2010	813.00		
Purple Communication - Donation CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges							
CaptionCall-Donation ZVRS - Donation Hyatt Regency Charges	6/xx/2012	Expected		Commission/Deaf Service	1,206,00		
ZVRS - Donation Hyatt Regency Charges	6/xx/2012	Expected	CaptionCall-Donat	Commission/Deaf Service	1,800.00		
Hyatt Regency Charges	6/xx/2012	Expected		Commission/Deaf Service	500.00		
Sub-Balance for June/July 2012 transactions (estimate)	6/xx/2012	Estimate		NASADHH including food arrangements		-2,155.00	
Sub-Balance for June/July 2012 transactions (estimate)							
Sub-Balance for June/July 2012 transactions (estimate)					3,500.00	-2,155.00	
Sub-Balance for June/July 2012 transactions (estimate)							
(** -*) 0000 0 1 1 1 2				Sub-Balance for June/July 2012 transactions (estimate)	1,345.00		
1 1 2 200 0 1 1 2 2 1 2							;
Balance after July 2, 2012 (estimate)				Balance after July 2, 2012 (estimate)	2,158.00		

NASADHH

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2009 Survey of the State Commissions, Divisions, and Councils Serving Deaf and Hard of Hearing People

Prepared by Steven A. Florio, M.S., Executive Director Rhode Island Commission on the Deaf and Hard of Hearing



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I. Purpose and Method

The purpose of this survey is to report the current functions, budget, staffing, demographic, and services of state agencies serving deaf and hard of hearing people in the United States. This will help agency administrators and their board members to gain understanding of how each commission, division, and council are structured as well as how their services and programs are delivered within their statutes and means in their respective states.

The Michigan Division on Deaf and Hard of Hearing volunteered to gather information and put it into a report back in 2002 and 2004. The last survey conducted was done in 2004. The Rhode Island Commission on the Deaf and Hard of Hearing stepped up and volunteered to gather information for this 2009 Survey Report. This report is developed primarily for the agency administrators and board members only.

A questionnaire was copied from the 2004 Survey Report with revisions including a section on demographics and a question on agency's change added. The 2009 Survey was created online through www.surveymonkey.com so everyone would be able to participate and respond more quickly and conveniently. The e-mail with url links to surveymoney.com was sent to 39 known states (including 2 in Minnesota) that have a commission, division, council, or office serving Deaf and Hard of Hearing persons. The respondents were asked to fill the questionnaire if they meet the definition below.

Definition of State Agency: A state government agency established and funded by the state legislature to serve deaf and hard of hearing people exclusively. Staff members are employees of the state civil service. This agency provides statewide services including but not limited to, information and referral, interpreter referral, interpreter classification or qualification or licensing, advocacy, and technical assistance. This state agency may have a commission, council, or board of appointees to give guidance to the agency.

The questionnaire asked for at least 85 informational items. Microsoft Excel 2003 was used to tabulate the responses. The tables were created to give the readers a clear picture of selected topics and a clear comparison eliminating the need for a lengthy written report. These responses were put together into a Microsoft Publisher 2003 format to create a final 2009 Survey Report. Frequent reminders were sent to the respondents after the deadline through e-mails and videophones (direct or via video relay service).

This 2009 Survey Report is distributed only to the agency administrators and/or board chairpersons of known states that are listed in the report electronically.

I. Purpose and Method (continued)

I am truly pleased to report that 100% participation in the 2009 survey has occurred and I want to thank all respondents for taking their time to participate in the survey. I am confident that anyone who reads this report will find the 2009 Survey Report informative and useful.

Please do not hesitate to contact me if you have questions or concerns about the 2009 Survey Report, I can be reached at 401-354-7651 either via point-to-point or video relay service or by e-mailing to me at SFlorio@cdhh.ri.gov.

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II. Executive Summary

The findings of the survey are summarized as follows:

- 1) Number of Respondents: All 39 state agencies including 2 in Minnesota responded to the questionnaire. This represents 100% participation of known state agencies or 76% of the states in United States of America.
- 2) Deaf and Hard of Hearing Terms: 85% of the agency names including the theme, "Deaf and Hard of Hearing".
- 3) Communication: 100% of the agencies who participated have a website on the internet. (Only 88% in 2004). 79% of the agencies now have videophone access. (No source back in 2004 but we can safely assume it was under 50% in 2004.)
- 4) Administrator: 39% of the administrator positions are state civil service classified and 26% of the positions are Governor-appointed. 59% of the administrators are either deaf or hard of hearing.
- 5) Administrator Salary: The salaries of the agency administrators in the survey range from \$35,000 to \$85,000 per year. 59% of the administrators are in the vicinity of \$45,000 to \$85,000, and 26% are \$85,000 and up.
- 6) Department: 28% (11) of the agencies are independent, followed by 23% (9) under Rehabilitative Services, Two 13% (5 each of two) fall under Human Rights/Services and Social/Health Services.
- 7) Board Composition: The size of respondents' boards range from 7 to 27 members. Four (4) respondents do not have a board. The board members in 28 (72%) states are appointed by the Governor. Board terms vary from 2 to 4 years. An overwhelming majority of the boards meet at least 4 times a year. 19 (49%) state commissions have a law requiring a majority of deaf and hard of hearing persons on the board. 100% of the state boards reimburse their members travel expenses, only one with a certain criteria (reimbursed if more than 50 miles travelled.).
- 8) Fiscal Year: All but five (5) states follow the July 1 through June 30 fiscal year.
- 9) Authorized Budget: Virginia has the largest budget (2004: North Carolina) and New Mexico has the highest dollar amount per capita (2004: North Carolina). Total of all 39 state agencies' budgets is \$86,992,065.00.
- 10) Staff Size: The number of employees on staff range from 1 to 72. (2004: 55) The average number of agency employees is 13 (2004: 12)

II. Executive Summary (Continued)

- 11) Services: The most common services that the agencies provide are Information and Referral (95%), Advocacy (90%), Deaf Awareness/Orientation (79%), Technical Assistance (77%), and Interpreter Referral (72%). Over half (1/2) of the agencies provide Assistive Technology, Interpreter Directory, CART Referral, Services to Hard of Hearing, Client Assistance, and Adult/Community Education. 13% (N = 5) of the state commissions provide or manage the telecommunication relay services.
- 12) Interpreter Services: 72% of the state agencies provide the Interpreter Referral service. 41% (N = 16) of the state commissions qualify or license interpreters within their state. The data sources used to compute the figures of Deaf and Hard of Hearing population among the state agencies are varied.
- 13) Demographic: California has a large general and deaf/hard of hearing population. The average percentage used to compute the Deaf and Hard of Hearing figures against the data source is 10%.
- 14) Agencies Affected since 2004: The most significant changes or impacts on the state agencies occurred in Texas (2004) and Washington (2009). Two newly established state agencies since 2004 are Florida (2004) and New York (2008). And since the 2004 survey, Vermont has been eliminated (2009).

1.0 AGENCY

1.1 Survey Participation

Thirty nine (39) state commissions, divisions, councils, and offices serving Deaf and Hard of Hearing persons from thirty eight (38) states responded to the questionnaire. That is fantastic because this is 100% participation. This is the first time that the report includes all state commissions, divisions, councils, and offices. There are a few states that do not have state agencies including commission, divisions, councils, and offices that can be founded under 1.2 List of States that do not have an agency serving Deaf and Hard of Hearing persons. (Table 1.1)

5	State	Apolicy Mains Control of the Control
1	Arizona	Arizona Commission for the Deaf and Hard of Hearing
2	California*	California Office of Deaf Access
3	Colorado	Colorado Commission for the Deaf and Hard of Hearing
4	Connecticut	Connecticut Commission on the Deaf and Hearing Impaired
5	Delaware	Delaware Office for the Deaf and Hard of Hearing
6	Florida	Florida Coordinating Council for the Deaf and Hard of Hearing
7	Hawaii	Hawaii Disability and Communication Access Board
8	Idaho	Idaho Council for the Deaf and Hard of Hearing
9	Illinois	Illinois Deaf and Hard of Hearing Commission
10	Indiana	State of Indiana, Deaf and Hard of Hearing, Employment and Innovations
11	Iowa	Deaf Services Commission of Iowa
12	Kansas	Kansas Commission for the Deaf and Hard of Hearing
13	Kentucky	Kentucky Commission on the Deaf and Hard of Hearing
14	Louisiana	Louisiana Commission for the Deaf
> -X. do., Annhances	Maine	Maine Division for the Deaf, Hard of Hearing, and Late Deafened
Symptomic and a second	Maryland	Maryland Governor's Office of the Deaf and Hard of Hearing
17	Massachusetts	Massachusetts Commission for the Deaf and Hard of Hearing
18	Michigan	Michigan Division on Deaf and Hard of Hearing
19	Minnesota (Commission)	Commission of Deaf, DeafBlind, and Hard of Hearing Minnesotans
20	Minnesota (DHHSD)	Minnesota Deaf and Hard of Hearing Services Division
21	Mississippi	Mississippi Office on Deaf and Hard of Hearing
22	Missouri	Missouri Commission for the Deaf and Hard of Hearing
23	Nebraska	Nebraska Commission for the Deaf and Hard of Hearing
24	Nevada*	Nevada, Aging & Disability Services Division - Disabilities Unit
25	New Hampshire	New Hampshire Office of the Deaf and Hard of Hearing
26	New Mexico	New Mexico Commission for the Deaf and Hard of Hearing Persons
27	New Jersey	New Jersey Division of the Deaf and Hard of Hearing
28	New York	New York State Interagency Coordinating Council for Services to Persons who are Deaf, Deaf-Blind, or Hard of Hearing
29	North Carolina	North Carolina Division of Services for the Deaf and Hard of Hearing
30	Oregon	Oregon Department of Human Services - Deaf and Hard of Hearing Services Program
31	Pennsylvania	Pennsylvania Office for the Deaf and Hard of Hearing
32	Rhode Island	Rhode Island Commission on the Deaf and Hard of Hearing
33	Tennessee	Tennessee Council for the Deaf and Hard of Hearing
34	Texas	Texas, Office for Deaf and Hard of Hearing Services
35	Utah	Utah Division of Services for the Deaf and Hard of Hearing
36	Virginia	Virginia Department for the Deaf and Hard of Hearing
37	Washington	Washington Office of the Deaf and Hard of Hearing
38	West Virginia	West Virginia Commission for the Deaf and Hard of Hearing
39	Wisconsin	Wisconsin Office for the Deaf and Hard of Hearing

^{* =} Agency overseeing grants that are awarded to the organizations serving the Deaf and Hard of Hearing persons.

1.2 List of States that do not have a state agency serving Deaf and Hard of Hearing persons.

Table 1.2

	Side	Comments
1	Arkansas	
2	Alabama	
3	Alaska	
4	Georgia	a nonprofit organization receiving state contract in providing statewide services for deaf and hard of hearing.
5	Montana	
6	North Dakota	
7	Ohio	
8	Oklahoma	
9	South Carolina	
10	South Dakota	
1 1	Vermont	Position eliminated effective June 2009.
12	Wyoming	

1.3 Communication and Technology

This section indicates how the public to contact representatives at the agency for any reason on any questions they may have. TTY was eliminated because it is clearly on the decline. However, the videophone has dramatically increased since 2004. As you can see, seventy-nine percent (79%) of all agencies have videophone available for the public to use to reach the agency. Also, in 2004, only 88% (n=26) of agencies have their websites available for the public. Today, 100% of state agencies have websites.

Table 1.3

N	Victoria	Take			Abustot atx
39	39	21	31	20	39
100%	100%	54%	79%	51%	100%

1.4 State Commissions, Councils, Divisions, and Offices Established

Michigan was the 1st state to pass legislation to create a state program or a state service for the Deaf and Hard of Hearing on October 29, 1937. The only time they were inactive was 1975 to 1979. Virginia was the first state to establish an independent state department (commission, council, division, and office) serving the Deaf and Hard of Hearing.

		As of January 2010		
State	Year	Anniversary		
Michigan	29-Oct-1937	72		
Virginia	1-Jul-1972	37		
Texas	1973	37		
Connecticut	1974	36		
lowa	1975	35		
New Jersey	31-Jul-1977	32		
Rhode Island	1977	32		
:Arizona	1978	32		
Tennessee	1-Jul-1978	31		
Minnesota (DHHSD)	1979	31		
Washington	1979	31		
Nebraska	Spring 1979	30		
California	1980	30		
Louisiana	1980	30		
Wisconsin	1981	29		
Kentucky	1982	28		
New Hampshire	1-May-1981	28		
Kansas	1-Jul-1982	27		
Utah	1983	27		
Oregon	1983	27		
Maine	1-Jul-1983	26		
Minnesota (Comm.)	1985	25		
Pennsylvania	1986	24		
Massachusetts	1-Jul-1986	23		
Indiana	1988	22		
Missouri	1988	22		
North Carolina	1989	21		
West Virginia	1989	21		
Nevada	1990	20		
Idaho	1-Jul-1991	18		
New Mexico	26-Jul-1991	18		
Delaware	1-Mar-1993	16		
Illinois	1-Jan-1997	13		
Mississippi	1-Jul-1998			
Hawaii	1-Jan-2000	10		
Maryland	2001	9		
Colorado	1-Jul-2001	8		
3	man and the second seco	. ° 5		
Florida New York	1-Jul-2004 2007	3		
New York	AUU I			

1.4 State Commissions, Councils, Divisions, and Offices Established (Continued)

Additional comments about their establishments

Indiana - Legislation was passed in 1988. The office opened in 1989.

Nevada - Relay and equipment distribution started in 1990. The advocacy component was added in 2002.

New York - Legislation was passed in July 2007. New York State Interagency Coordinating Council for Services to Persons who are Deaf, Deaf-Blind, or Hard of Hearing was officially established on January 1, 2008.

Pennsylvania - Legislation was passed in 1986. The office opened in 1988.

Rhode Island - Legislation was passed in 1977. The office opened on May 9, 1978. It was restructured on July 13, 1992 with its current name, RI CDHH.

Wisconsin

- Legislation was passed in 1939 to set a state appropriation for Wisconsin Association of the Deaf (WAD)'s Service Bureau of the Deaf. According to the March 1979 final report of the Governor's Committee on Problems of Deaf & Hard of Hearing People, the Service Bureau initially was a private non-profit agency (unconfirmed) operated by the WAD. Apparently as a result of the final report, which had a list of recommendations, the Bureau became a state entity---by 1981, under the auspices of the then-named Department of Health and Social Services. The agency was formerly called, the Bureau of the Hearing Impaired.

1.5 History of the First State Agency Established in the United States of America.

Michigan's Act 72 of 1937 was passed to establish the Division on Deafness on October 29, 1937. The original language of the bill is below:

DIVISION ON DEAFNESS ACT

Act 72 of 1937

AN ACT to establish the division on deafness and the advisory council on deafness within the department of labor; to prescribe the powers and duties of the department, the division, the council, and certain state officers; to establish a fund and provide for expenditures from that fund; and to provide for an appropriation.

History: 1937, ACT 72, Eff. Oct. 29, 1937.

Additional history milestones of the Division on Deaf and Hard of Hearing (Current name of the State Agency in Michigan) are as follows:

HISTORY/MILESTONES

- 1921 Michigan Association of the Deaf (MAD) began first effort to establish the Division of Deaf and Deafened (DDD).
- 1937 The legislature passed P.A. 72 that established the DDD in the Department of Labor and Industry to assist deaf persons with employment.
- 1938 First deaf person was hired as the first director.
- 1958 DDD was transferred to Michigan Employment Security Commission.
- 1975 DDD ceased activity after the director resigned.
- 1979 DDD was revitalized by Governor William Milliken and transferred to Michigan Department of Labor, Bureau of Commission on Handicapper Concerns.
- 1980 DDD reopened its doors with Christopher Hunter as its director. It has new services: advocacy, information and referral, interpreter referral, and technical assistance. It has staff of 4 persons: State Interpreter Coordinator, Rights Representative and Secretary.
- 1988 The legislature amended the law (P.A. 434), changing name to Division on Deafness and revising responsibilities to protect and assist all hearing impaired persons, with special emphasis on deaf persons", forming 13 member Governor appointed Advisory Council,
- 1993 Hard of Hearing Specialist position was added to serve hard of hearing Michigan citizens.
- 1996 DDD and Michigan Commission on Disability Concerns were eventually transferred to the Michigan Independence Agency after the Department of Labor was abolished.
- 1997 Hard of Hearing Specialist position was eliminated through the department downsizing affected by the early retirement program.
- 1998 Hard of Hearing Specialist position was restored through public contacts to the legislature and department. Today DOD has four staff members: Director, State Interpreter Coordinator, Hard of Hearing Specialist, and Secretary.
- 2002 Executive Order #2002-10 DOD renamed Division on Deaf and Hard of Hearing (DODHH)

1.6 Has Your Agency Changed Since 2004?

California - Our Deaf Access Program has undergone budget cuts since 2004.

Colorado - 3.3 FTEs added in February 2010.

Connecticut - In 2005, the agency's Business/Human Resources Department was transferred to the Department of Administrative Services. This was done through legislation, 23 agency's Business/HR Departments were merged. This has been positive for the agency, more resources are available especially with the tight fiscal constraints. It has not increased restrictions or had an effect on the challenges that confront the agency.

Indiana - Yes, we are more connected to Vocational Rehabilitation Services and Bureau of Blind and Visually Impaired. Some ways, it has helped working closer with the Rehabilitation Counselors for the Deaf but it has become more challenging too as not everyone understands the challenges faced by deafness.

Kansas - Downsized by losing one part-time support staff. Our agency is now 100% State General Funds.

Maryland - No - there were legislative attempts to merge us with the Department of Disabilities but they did not pass.

Massachusetts - Through interagency agreements, we administer, coordinate, and provide communication access to other agencies; funding for providing these services increased from \$300K to over \$900K. Budget reductions have reduced funding for both administrative support and direct services. We shared Information Technology, Human Services, and Legal Counsel staff with other agencies within EOHHS in effort to stretch resources.

Minnesota (Comm.) - No, in fact, our budget has gone from \$95,000 in 2004 to \$600,000 this year.

Minnesota (DHHSD) - The agency has gradually reduced level of services over the past few years due to budget reduction/unallotment decisions.

Missouri - In FY2010, the commission received an 18% budget reduction in Personnel money. This resulted in the loss of 1 full-time position, and reduced a second position to part-time.

Nebraska - Downsized one staff due to budget cuts. Minimal impact.

Nevada - Under DHHS, we were an offshoot of the Departments' Director's. Last year, the Legislature decided to merge us with Aging Services changing the name. Our prior agency was The Office of Disability Services.

Has your agency changed since 2004? (Continued)

New York

Legislation was passed in July 2007. New York State Interagency Coordinating Council for Services to Persons who are Deaf, Deaf-Blind, or Hard of Hearing was officially established on January 1, 2008. This is part of New York State Commission on Quality of Care and Advocacy for Persons with Disabilities. NYS Commission on Quality of Care and Advocacy for Persons with Disabilities was originally established on January 1, 1978 under different name and is with its current name starting on April 15, 2005. In 2005, the Commission on Quality Care of the Mentally Disabled and the Office of Advocate for Persons with Disabilities merged by statute to avoid duplication and to improve service delivery and advocacy for persons with disabilities.

North Carolina -

In SFY2008-2009, the Governor and the NC General Assembly, in two separate actions, transferred a total of \$9.5M from the Telecommunications Trust Fund into the General Fund to address NC's budgetary shortfall. Legislative action mandated that DSDHH's Community Resources Program (seven regional centers) be funded by the Telecommunications Relay Service receipts instead of general appropriations, giving the State of NC \$2M per year. Due to the large cash balance in the Telecommunications Trust Fund, these actions did not significantly impact DSDHH's programs and services. However, DSDHH must comply with certain restrictions on travel and expenditures in order to ensure a balanced budget at the end of SFY2010.

Oregon

In 2005, our program was moved from the Oregon Disabilities Commission and placed within the Department of Human Services. The effect was to downsize this program while we are under a hiring freeze.

Rhode Island

In 2007, the Legislature attempted to consolidate RICDHH into a Department of Advocacy with 4 of the small agencies but failed. In 2008, Governor attempted to consolidate RICDHH into the Department of Elderly Affairs with two other small agencies in response to the legislature's request but failed.

Texas

In 2004 the state legislature undertook a major reorganization by consolidating 3 agencies into 4 new departments. The former Texas Commission for the Deaf and Hard of Hearing is now the Office for Deaf and Hard of Hearing Services (DHHS) under the Dept of Assistive and Rehabilitative Services. All staff and programs have remained intact and services remain unchanged but with increased funds. In the organization DHHS is under the Division of Vocational Rehabilitation and thus able to use agency funds for matching purposes to draw down federal funds. This has resulted in roughly \$1.2 million increase in service funds which has a very positive impact. A troublesome restriction is that we cannot be involved with the legislature. Much more policy and paperwork are involved with the new structure and we have not gotten additional staff to handle the paperwork. Overall the changes have been helpful.

Has your agency changed since 2004? (Continued)

Utah - No but we have had to lay off a few employees that has affected the services we provide.

Washington - The previous and current Secretary has reorganized and retained ODHH reporting to the Office of the Secretary. This reorganization is at the discretion of Secretary, not law or executive order. This is positive as ODHH visibility is heightened, opportunities to access executive management is available, etc..

West Virginia - In 2004 the positions of Staff Interpreter and Deputy Director were consolidated into one position - Deputy Director (who is also an interpreter). This has not had a significant impact other than in amount of manpower to complete projects.

2.0 Administration

2.1 Position Title and Type

Of 39 state agencies, 38% (N = 15) of positions is called, Director and 36% (N = 14) of positions is called, Executive Director. 38% (N = 15) of positions are identified as state civil service classified and 25% (N = 10) of positions are identified as Governor Appointee.

Table 2.1 Title

THE STATE OF THE S	54 N
Director	15
Executive Director	14
Administrator	2
Deputy Director	1
Office Public Information Officer	1
Program Assistant	1
Manager	1
Commissioner	1
Social Services Program Specialist II	1
State Coordinator	1
Public Policy and Government Relations Director	1
Total	39

Table 2.2 Type

Type	N
Civil Service Class	15
Governor Appointee	10
Report to the governing board	5
Appointed by the Department	4
Report directly to Governor	3
State Administrative, exempt	1
Report directly to OVR Director	1
Total	39

2.2 Hearing Status of Administrators

Of 39 State Agencies, 59% (N = 23) of state agency administrators identified themselves deaf or hard of hearing. Only 1% increase since 2004. The majority, if not all, of administrators who identified themselves as hearing know Sign Language. (Based on conversations between the administrators and Steven Florio of Rhode Island while conducting the 2009 Survey.)

Table 2.3 Hearing Status

	2009		200	4
Baring Status	States	*	States	*
Deaf	. 17	44%	13	50%
Hard of Hearing	6	15%	2	: 8%
Hearing	16	41%	7	27%
No response	0	0%	4	15%
Total	39	100%	26	100%

2.3 Salary Range of Administrators

Of 39 State Agencies, 26% of salary ranges is \$85,000 and over. The rest of salary ranges are pretty even. The possible factors are the size of agency's annual budget, administrators' longevity among the administrators, base salary range, college education, and other incentives.

Table 2.4 Salary Range of Administrators

•	200	9	200	4
Salary Range				
\$0 - \$25,000	0	0%	0	, 0%
\$25,001 - \$35,000	0	0%	0	0%
\$35,001 - \$45,000	4	10%	2	8%
\$45,001 - \$55,000	5	13%	7	28%
\$55,001 - \$65,000	7	18%	3	12%
\$65,001 - \$75,000	. 5	13%	7	28%
\$75,001 - \$85,000	, 6	15%	5	20%
\$85,001 and higher	10	26%	1	4%
No Response	2	5%	0	0%
Total	39	100%	25	100%

2.4 List of Administrators

Table 2.4 - Administrators

*** SEE	Administrator	Tale:
Arizona	Sherri Collins	Executive Director
California	Tom Lee	Deputy Director
Colorado	Cliff Moers	Administrator
Connecticut	Stacie J. Mawson	Executive Director
Delaware	Loretta Sarro	Public Information Officer
Florida	Mary Grace Tavel	Program Assistant
Hawaii	Francine Wai	Executive Director
Idaho	Steven Snow	Executive Director
Illinois	John Miller	Director
Indiana	Rhonda Marcum	Manager
lowa	Kathryn Baumann-Reese	Administrator
Kansas	Rebecca J. Rosenthal	Executive Director
Kentucky	Virginia L. Moore	Executive Director
Louisiana	Naomi DeDual	Executive Director
Maine	John G. Shattuck	Division Director
Maryland	Lisa H. Kornberg	Director
Massachusetts	Heidi L. Reed	Commissioner
Michigan	Sheryl Emery	Director
Minnesota (Comm.)	Mary Hartnett	Executive Director
Minnesota (DHHSD)	Bruce Hodek	Division Director
Mississippi	Benjamin Wagenknecht	Director
Missouri	Barry Critchfield	Executive Director
Nebraska	Peter J. Seiler, Ed.D.	Executive Director
Nevada	Betty Hammond	Social Svcs Pgm Specialist II
New Hampshire	H. Dee Clanton	State Coordinator
New Mexico	Barbara "BJ" Wood	Executive Director
New Jersey	David Alexander	Director
New York	Rosemary Lamb	Director
North Carolina	Jan Withers	Director
Oregon	Patricia O'Sullivan	Public Policy/Gov't Rel. Director
Pennsylvania	Sharon Behun	Director
Rhode Island	Steven A. Florio	Executive Director
Tennessee	Thom Roberts	Executive Director
Texas	David W. Myers	Director
Utah	Marilyn Call	Division Director
Virginia	Ronald L. Lanier	Director
Washington	Eric Raff	Director
West Virginia	Marissa Johnson	Executive Director
Wisconsin	Linda Huffer	Director

3.0 Location of the Agency

Department	N	State
Independent or Executive Office	11	Arizona, Connecticut, Idaho, Illinois, Maryland, Minnesota (Commission), Nebraska, New Mexico, New York, Rhode Island, and Virginia
	5	and a second season of the second sec
Social and/or Health Services	J	California
Department of Social Services Department of Health	**************************************	Florida
Department of Realth Department of Social and Health Services		Washington
Department of Health Services		Wisconsin
Department of Health Department of Health		Hawaii
Department of nearth		tuning and the state of the sta
Human Rights or Services	5	A CONTRACTOR OF THE STATE OF TH
Within the Division of Boards and Commissions under the Dept. of Human Ser-		0-1
vices		Colorado
Department of Human Rights		lowa
Department of Human Services		Minnesota (DHHSD)
Department of Human Services	alacikul praru umma	New Jersey
Department of Human Services		Oregon
Health and Human Services	4	- Andrew Look and the control of the
Executive Office of Health and Human Services		Massachusetts
Department of Health and Human Services, Aging and Disability Services Division		Nevada
Department of Health and Human Resources		West Virginia
Department of Health and Human Services		North Carolina
Rehabilitation Services	9	
Division of Vocational Rehab under Dept of Labor		Delaware
Bureau of Rehabilitative Services under Dept of Family and Social Service	* * *	Indiana
Social Rehabilitation Service within the Kansas Rehabilitation Services	4	Kansas
Department of Social Service within the LA Rehabilitation Services		Louislana
Bureau of Rehabilitation under Department of Labor		Maine
Department of Rehabilitation Services	i i	Mississippi
Division of Vocational Rehab under Dept of Human Services	·	Tennessee
Department of Assistive and Rehabilitative Services		Texas
Department of Rehabilitation under Dept of Education	; ; ;	Utah
I abor	2	~ Ju
Labor Department of Labor, Energy and Economic Growth	† 	Michigan
Department of Labor, Energy and Economic Growth Department of Labor and Industry	<u> </u>	Pennsylvania
Department of Labor and Industry		A A A A A A A A A A A A A A A A A A A
Education	3	
Education and Workforce Development Cabinet	<u> </u>	Kentucky
Department of Elementary and Secondary Education	<u>.</u>	Missouri
Department of Education, Division of Career Technology and Adult Learning	; ;	New Hampshire

4.0 Board Composition

4.1 Size

For the purpose of this section, the term, "board" is defined as a board, commission, or advisory council. Only 4 state agencies (California, Delaware, Texas, and Washington) do not have a board/advisory function. Washington's Advisory Committee was abolished by the Governor's Executive Order this year (2009).

The largest number of seats is 27 in North Carolina and the smallest number of seats is 7 in 4 states (Colorado, Indiana, Iowa, and New Mexico).

49% (N = 19) of State Agencies have a law requiring a majority of deaf and hard of hearing persons on the board.

Table 4.1—Size of Board Composition

State	•	thejority DINH Required
North Carolina	27	· No
Maine	26	No
Connecticut	21	No
Massachusetts	12-20	Yes
Florida	17	No
Hawaii	17	No
Kansas	17	No
Louisiana	17	No
New Hampshire	17	No
Pennsylvania	17	No
West Virginia	17	No
Maryland	16	Yes
Minnesota (Comm.)	15	Yes
Utah	15	Yes
New York	15	Yes
Arizona	. 14	Yes
New Jersey	14	Yes
Kentucky	13	Yes
Michigan	13	Yes
Rhode Island	13	Yes

388	SI N	Majority C/HH Required
Oregon	12	Yes
Illinois	11	Yes
Nevada	11	No
Tennessee	11	No
Idaho	9	No
Mississippi	9	No
Missouri	9	Yes
Nebraska	9	Yes
Virginia	9	No
Wisconsin	9	Yes
Minnesota (DHHSD)	. 8	Yes
Colorado	7	No
Indiana	. 7	Yes
lowa	7	Yes
New Mexico	7	Yes
California	N/A	N/A
Delaware	N/A	N/A
Texas	N/A	N/A
Washington	N/A	N/A

4.2 Seats of the Board

72% (N = 28) of State Agencies' board members are appointed by the Governor.

Table 4.2—Seats of the Board

- 1	One Term square, to a mariber of	**************************************	The Travel Expense Medicineses?
New Mexico	6	Governor	Yes
Missouri	4	Governor	Yes
Virginia	4	Governor	Yes
Wisconsin	7	Governor	Yes
Florida	, , ,	Governor	Yes
the state of the s	4	Governor	Yes
Pennsylvania	 .	Mixed of Governor, Department Administrator, and	recommendation of the second second
North Carolina	4	selected by membership	Yes
Nottii Caroiina	-t	Governor and selected by the membership for some	
Kentucky	2 to 4	slots	Yes
Hawaii	2 to 4	Governor	Yes
	3	Governor	Yes
lowa	9	OUVEITION	Anna dadan dalim dina dina penggan dan dan dan dan dan dan dan dan dan d
Minnesota	3	Department Administrator	Yes
(DHHSD)	3	Governor	Yes
Illinois Novada	3	Department Administrator	Yes
Nevada	CONTRACTOR OF THE PARTY OF THE		Yes
Tennessee	.,	Governor	Yes
Michigan	3	Governor	parameters come a man and a community of the community of
New Jersey	3	Governor	Yes
Minnesota		0-11-11-11	Yes
(Comm.)	3	Governor	Commence of the Contract of th
Maryland	3	Governor	Yes if they requested.
Kansas	3	Governor	Yes
Louisiana	3	Governor	Yes
New Hampshire	3	Department Administrator	Yes
West Virginia	3	Governor	Yes _
Indiana	2 to 3	Department Administrator	Yes _
Colorado	2	Governor	Yes Yes
Mississippi	2	Department of Rehab Services' Executive Director	Yes
Nebraska	: 2	Governor	Yes
Oregon	: 2	Department Administrator	Yes
Rhode Island	2	Governor	Yes if they requested.
Arizona	2	Governor	Yes
Participation of the second of		Section 20 version of the section of	Yes if they live more than 50 miles
Utah	2	Board of Education	away.
Maine	2	Governor	Yes
Massachusetts	2	Governor	Yes
	Coterminous with	To the state of th	,
Connecticut	Governor	Governor	Yes
	Vary depending		
Idaho	on each seat	Governor	Yes
New York	Staggered	4 by Governor and 4 by legislative leaders	Yes
California	N/A	N/A	N/A
Delaware	N/A	N/A	N/A
Texas	N/A	N/A	N/A
Washington	N/A	N/A	N/A

4.3 Representatives on the Board

Almost all state agencies have a law requiring both Deaf and Hard of Hearing to serve on the board. Parents are second after Deaf and Hard of Hearing,

Table 4.3 Representatives

Representative	N N
Deaf	31
Hard of Hearing	30
Parent	20
State Government Official	16
Deaf Organization	15
Educator	12
Interpreter Organization	11
General Public	9
Audiologist	8
Hard of Hearing Organization	7
Local Rep. (each island county incl'd)	7
Late Deafened Organization	5
Physician including otolaryngolsist	4
Hearing	3
Early Intervention Provider	3
Not Required	3
Psychologist	2
No Response	2

Table 4.4 Other Representatives

Other Representatives	- N	Ų.,
Professionals	. 7	
State Agency Representatives	. 4	
Community Representative (D/HH)	: 3	
Late-Deafened	2	
Interpreter	2	
Hearing Aid Specialist/Dispenser	2	
Supt of School for the Deaf/School Rep	2	
Deaf-Blind organization	2	
Government Representatives-ex officers	1	
Elders	1	
Children and Families	1	
Business Community	± 1	
Local Public School	1	
Speech Disabled	1	
Director of Vocational Rehabilitation	1	
Black-Deaf organization	. 1	
Persons with Disabilities	, 1	
Service Providers	1	

4.4 Meeting

74% (N = 29) of the state boards are required to meet at least 4 times a year. Utah is required to meet at least 10 times a year. Massachusetts is required to meet at least 8 times a year. Only two states (Mississippi and New York) are required to meet at least 3 times. Also, only two states (Oregon and Nevada) do not have any law requiring a certain number of meetings a year. Utah allows the members to participate in the meeting by video conferencing.

4.5 Communication Access at the Meeting.

All State Agencies' boards arranged various communication access services for their meetings without requiring a request of communication access in advance.

Interpreters	-	-	-	100%
CART	-	-	-	90%
Assistive Liste	ning I	Devices	-	28%
Assistive Liste	ning S	ystem	-	14%
Oral Interprete	r -	-	-	5%
Tactile Interpre	eters fo	or Deaf-B	lind -	5%

5.0 Funding

5.1 Fiscal Year

Only 5 states have different fiscal years than the rest of state agencies. 33 states follow the July 1st through June 30th fiscal year. 3 of 5 states (Michigan, New Hampshire, and Wisconsin) start their fiscal year on October 1st and end on September 30th, similar to the Federal Government's fiscal year. One of 5 states, Texas, starts on September 1st and ends on August 31st. And one of 5 states, New York, starts on April 1st and ends on March 31st.

5.2 Authorized Budget

The respondents were asked for their total authorized annual budget for their agencies. It is difficult to compare state budgets when no two state agencies providing the same services and programs. Some states manage or provide telecommunications relay service (TRS) and/or Telecommunication Distribution and others do not. TRS and Telecommunication Distribution services account for a large portion of the budgets.

For your own assessment needs, various data formats are provided as follows:

- 1) Budget by Per Capita
- 2) Annual Gross Amount
- 3) Rank by State Funds
- 4) Rank by "Surcharge" Funds
- 5) Rank by General Population including Gross Amount and State Funds

By per capita, New Mexico is leading in per capita, \$2.07 per person, to provide services for the Deaf and Hard of Hearing. Florida is the lowest with \$0.01 per capita based on 18,881,445 people living in Florida and are used to services provided for Deaf and Hard of Hearing people by the Florida government. New York is the 2nd lowest with \$0.02 per capita. Please see Table 5.1 for per capita of all states next page.

Table 5.1 Budget by Per Capita

	State.	P	or Cache		Gross	Population
1	New Mexico	\$	2.07	\$	4,100,000.00	1,984,356.00
2	Virginia	\$	2.04	\$	15,859,138.00	7,769,089.00
3	North Carolina	\$	1.44	\$	13,000,000.00	9,000,000.00
4	Minnesota (DHHSD)	\$	1.36	\$	6,800,000.00	5,000,000.00
5	Hawaii	\$	1.09	\$	1,400,000.00	1,288,198.00
6	Utah	\$	0.91	\$	2,021,891.00	2,233,169.00
7	Washington	\$	0.89	\$	5,624,971.00	6,287,759.00
8	Massachusetts	\$	0.87	\$	5,500,000.00	6,349,097.00
9	Arizona	\$	0.84	\$	5,441,100.00	6,500,000.00
10	Nevada	\$	0.68	\$	1,646,018.00	2,414,807.00
11	Louisiana	\$	0.64	\$	2,800,000.00	4,400,000.00
12	Nebraska	\$	0.48	\$	858,400.00	1,783,432.00
13	20	\$	0.44	\$	1,529,248.00	3,501,252.00
	Maine	\$	0.43	\$	560,508.00	1,300,000.00
15	Rhode Island	\$	0.37	\$	370,146.00	1,011,960.00
16	Colorado	\$	0.21	\$	954,040.00	4,550,688.00
17	Tennessee	\$	0.19	\$	1,020,000.00	5,464,458.00
18		\$	0.19	\$	3,900,500.00	21,000,000.00
19	The second secon	\$	0.18	\$	313,721.00	1,700,000.00
20	ACCOMMENSATION AND ADDRESS OF THE PROPERTY AND ADDRESS OF THE PARTY OF	\$	0.15	\$	133,900.00	873,092.00
21	West Virginia	\$	0.15	\$	268,000.00	1,800,000.00
22	region concern areas and concern and areas and areas are set of the concern and areas are set of the concern areas are are a set of the concern areas areas are a set of the concern areas are a set of the concern areas	\$	0,14	\$	860,000.00	6,000,000.00
23		\$	0.14	\$	5,200,000.00	36,700,000.00
	Iowa	\$	0.13	\$	378,792.00	2,926,324.00
	Kansas	\$	0.11	\$	290,000.00	2,700,000.00
	Wisconsin	\$	0.10	\$	500,000.00	5,000,000.00
	Michigan	\$	0.10	\$	1,000,000.00	10,003,422.00
	Minnesota (Comm.)	\$	0.10	\$	495,000.00	5,000,000.00
	Idaho	<u>.</u> \$	0.09	\$	150,600.00	1,600,000.00
	New Jersey	\$	0.09	\$	807,000.00	8,682,661.00
31	programmer company and a speciment and a series of the company of	\$	0.07	₹\$	403,792.00	5,800,310.00
	Illinois	\$	0.07	\$		12,419,293.00
33	(Danker and and and and	\$	0.06	\$	water 65. If Annual A "mile Hillian Handliffe" in mir. inn. er v. v.	3,790,060.00
34	MARKET IN BUILD TO MAKE IT.	\$	0.05	\$		5,633,597.00
35		\$	0.05	\$		6,195,643.00
	Pennsylvania	\$	0.04	\$		12,448,279.00
37		\$	0.04	\$		2,921,088.00
38	The second of th	\$	0.02	\$		19,460,297.00
39	Florida	\$	0.01	\$	250,000.00	18,881,445.00

^{* = \$316,000} was appropriated by the General Assembly when the Interagency Coordinating Council for the Deaf and Hard of Hearing was first established. \$316,000 and additional adjustments annually are now part of the overall agency's budget, NYS Commission on Quality of Care and Advocacy for Persons with Disabilities, (\$17.6m)

Table 5.2 Rank by Annual Gross Amount

		1	
1	Virginia	<u>;</u> \$	15,859,138.00
2	North Carolina	\$	13,000,000.00
3	Minnesota (DHHSD)	\$	6,800,000.00
4	Washington	\$	5,624,971.00
5	Massachusetts	\$	5,500,000.00
6	Arizona	\$	5,441,100.00
7	California	\$	5,200,000.00
8	New Mexico	\$	4,100,000.00
9	Texas	\$	3,900,500.00
10	Louisiana	\$	2,800,000.00
11	Utah	\$	2,021,891.00
12	Nevada	\$	1,646,018.00
13	Connecticut	\$	1,529,248.00
14	Hawaii	\$	1,400,000.00
15	Tennessee	\$	1,020,000.00
16	Michigan	\$	1,000,000.00
17	Colorado	\$	954,040.00
18	Kentucky	\$	860,000.00
19	Nebraska	\$	858,400.00
20	Illinois	\$	808,800.00
21	New Jersey	\$	807,000.00
22	Maine	\$	560,508.00
23	Wisconsin	\$	500,000.00
24	Minnesota (Comm.)	\$	495,000.00
25	Pennsylvania	\$	460,000.00
26	Missouri	\$	403,792.00
27	lowa	\$	378,792.00
28	Rhode Island	\$	370,146.00
29	Indiana	\$	325,000.00
30	New York*	\$	316,000.00
31	New Hampshire	\$	313,721.00
32	Maryland	\$	301,000.00
33	Kansas	\$	290,000.00
34	West Virginia	\$	268,000.00
35	Florida	\$	250,000.00
36	Oregon	;\$	240,000.00
37	Idaho	\$	150,600.00
38	Delaware	\$	133,900.00
39	Mississippi	\$	104,500.00

^{* = \$316,000} was appropriated by the General Assembly when the Interagency Coordinating Council for the Deaf and Hard of Hearing was first established. \$316,000 and additional adjustments annually are now part of the overall agency's budget, NYS Commission on Quality of Care and Advocacy for Persons with Disablities.(\$17.6m)

Table 5.3 Rank by State Funds

The funding source of the state agencies varies. State agencies that received at least 85% from the surcharge fund (excise tax or other names) are <u>excluded</u> from this list. To be included, state agencies receive state funds appropriated by the state legislature and/or Memo of Understanding (MOU)/Grants through other state agencies/departments.

	State	ĵ	State Funds
1	Massachusetts	\$	5,280,000.00
2	Minnesota (DHHSD)	\$	5,168,000.00
3	California	\$	2,860,000.00
4	Louisiana	\$	2,800,000.00
5	Utah	\$	2,021,891.00
6	Connecticut	\$	1,529,248.00
7	Hawaii	\$	1,400,000.00
8	Texas	\$	1,189,652.50
9	Tennessee	\$	1,020,000.00
10	Michigan	\$	1,000,000.00
11	Kentucky	\$	860,000.00
12	Nebraska	\$	858,400.00
13	Illinois	\$	808,800.00
14	New Jersey	\$	807,000.00
15	Wisconsin	\$	500,000.00
16	Minnesota (Comm.)	\$	495,000.00

	State	<u> </u>	tate Funds
17	Pennsylvania	\$	460,000.00
18	Missouri	\$	403,792.00
19	lowa	\$	378,792.00
20	Rhode Island	\$	370,146.00
21	Indiana	\$	325,000.00
22	Maine	\$	319,489.56
23	New York*	\$	316,000.00
24	Maryland	\$	301,000.00
25	Kansas	\$	290,000.00
26	West Virginia	\$	268,000.00
27	Florida	\$	250,000.00
28	Oregon	: \$	240,000.00
29	Idaho		150,600.00
30	Delaware	\$	133,900.00
31	Mississippi	\$	104,500.00
32	New Hampshire	\$	

^{* =} Please check the footnotes in the previous page of Annual Gross Amount for information on NY.

Table 5.4 Rank by "Surcharge" Funds

The definition, "Surcharge", refers to a charge against the telephone on landlines, wireless, and internet known as VOIP paid by the consumers in these respective states to cover various services and programs provided. Some states have different names for it such as Disabled Telephone Users Fund, Excise Tax, Universal Service Fund, and TRS fund. Most of them are set up by the State Public Utilities Commission or the similar.

	Side.	134	Funding	From other sources
1	Virginia	\$	14,431,815.58	99% from Communications Tax for Relay
2	North Carolina	\$	12,900,000.00	99% from surcharge on landlines and wireless.
		ĺ		100% from Excise Tax from Telephone subscribers TRS
3	Washington	\$	5,624,971.00	surcharges.
4	Arizona	\$	5,441,100.00	100% - Excise Tax (telephone landline only)
5	New Mexico	\$	4,100,000.00	100% from Telephone Relay service surcharges
6	Nevada	\$	1,646,018.00	100% from PUC's telecommunication fund
7	Minnesota (DHHSD)	\$	1,632,000.00	24% from telephone surcharge for TEDP
8	Colorado	\$	820,474.40	86% from Disabled Telephone Users Fund
9	Maine	\$	140,127.00	25% from Universal Service Fund.

Table 5.5 Rank by General Population including Gross Amount and State levels.

	State	- Distriction			***	State Find	Ω	ther educes.
1	California	36,700,000.00	_	5,200,000.00	\$	2,860,000.00		2,340,000.00
2	Texas	21,000,000.00	\$	3,900,500.00	\$	1,189,652.50		2,710,847.50
3 ·	New York*	19,490,297.00	\$	316,000.00	\$	316,000.00	\$	-
4	Florida	18,881,445.00	\$	250,000.00	\$	250,000.00	\$	H
5	Pennsylvania	12,448,279.00	\$	460,000.00	\$	460,000.00	\$	-
6	Illinois	12,419,293.00	\$	808,800.00	\$	808,800.00	\$	
7	Michigan	10,003,422.00	\$	1,000,000.00	\$	1,000,000.00		
8	North Carolina	9,000,000.00	\$	13,000,000.00	\$	13,000,000.00	\$	
9	New Jersey	8,682,661.00	\$	807,000.00	\$	807,000.00	\$	-
10	Virginia	7,769,089.00	\$	15,859,138.00	\$	1,427,322.42	\$1	4,431,815.58
11	Arizona	6,500,000.00	\$	5,441,100.00	\$	5,441,100.00	\$	-
12	Massachusetts	6,349,097.00	\$	5,500,000.00	\$	5,280,000.00	\$	220,000.00
13	Washington	6,287,759.00	\$	5,624,971.00	\$	5,624,971.00	\$	
14	Indiana	6,195,643.00	\$	325,000.00	\$	325,000.00	\$	-
15	Kentucky	6,000,000.00	\$	860,000.00	\$	860,000.00	\$	· -
16	Missouri	5,800,310.00	\$	403,792.00	\$	234,692.00	\$	169,100.00
17	Maryland	5,633,597.00	\$	301,000.00	\$	301,000.00	\$	-
18	Tennessee	5,464,458.00	\$	1,020,000.00	\$	1,020,000.00	\$	-
19	Minnesota (Comm.)	5,000,000.00	\$	495,000.00	\$	495,000.00	\$	_
20	Minnesota (DHHSD)	5,000,000.00	\$	6,800,000.00	\$	6,800,000.00	\$	-
21	Wisconsin	5,000,000.00	\$	500,000.00	\$	500,000.00	\$	
22	Colorado	4,550,688.00	\$	954,040.00	\$	954,040.00	\$	
23	Louisiana	4,400,000.00	\$	2,800,000.00	\$	2,800,000.00	\$	
24	Oregon	3,790,060.00	\$	240,000.00	\$	240,000.00	\$	
25	Connecticut	3,501,252.00	\$	1,529,248.00	\$	1,092,320.00	\$	436,928.00
26	lowa	2,926,324.00	\$	378,792.00	\$	378,792.00	\$	<u>-</u>
27	Mississippi	2,921,088.00	\$	104,500.00	\$\$	104,500.00	\$	-
28	Kansas	2,700,000.00	\$	290,000.00	\$	290,000.00	\$	_
29	Nevada	2,414,807.00	\$	1,646,018.00	\$	1,646,018.00	\$	
30	Utah	2,233,169.00	\$	2,021,891.00	\$	1,821,891.00	\$	200,000.00
31	New Mexico	1,984,356.00	\$	4,100,000.00	\$	4,100,000.00	\$	
32	West Virginia	1,800,000.00	\$	268,000.00	\$	268,000.00	\$	-
33	Nebraska	1,783,432.00	\$	858,400.00	63	832,648.00	\$	25,752.00
34	New Hampshire	1,700,000.00	\$	313,721.00	\$	-	\$_	313,721.00
35	Idaho	1,600,000.00	\$	150,600.00	\$	143,070.00	\$	7,530.00
36	Maine	1,300,000.00	\$	560,508.00	\$	462,399.00	\$	98,109.00
37	Hawaii	1,288,198.00	\$	1,400,000.00	\$	1,400,000.00	\$	
38	Rhode Island	1,011,960.00	\$	370,146.00	\$	370,146.00	\$	<u></u>
39	Delaware	873,092.00	\$	133,900.00	\$	133,900.00	\$	-

^{* = \$316,000} was appropriated by the General Assembly when the Interagency Coordinating Council for the Deaf and Hard of Hearing was first established. \$316,000 and additional adjustments annually are now part of the overall agency's budget, NYS Commission on Quality of Care and Advocacy for Persons with Disabilities.(\$17.6m)

6.0 Staffing

6.1 Full-time and Part-time Count

3 States, North Carolina, Minnesota, and Massachusetts, have the largest number of full-time employees on their staff. Connecticut has a large number of part-time employees on their staff. The average of full-time employees among 39 state agencies is 11 employees. For part-time employees, the average is 2 employees.

Table 6.1 Rank by Total Staff

		Pare Title	
1 North Carolina	71	1	72
2 Massachusetts	51.66	13	64.66
3 Minnesota (DHHS		0	53
4 Connecticut	9	40	49
5 Indiana *	3	21	24
6 Utah	20	2	22
7 Texas	18	0	18
8 Washington	17	0	17
9 Hawaii	16	0.5	16.5
10 New Mexico	16	0	16
11 Arizona	15	0	15
12 Kentucky	13	0	13
13 Nebraska	12	1	13
14 Virginia	9	2	11
15 Nevada	9.56	0	9.56
16 New Jersey	9	0	9
17 Wisconsin	8	1	9
18 Illinois	8	0	8
19 Colorado**	6.1	0	6.1
20 Minnesota (Comr		0	5
21 Pennsylvania	5	0	. 5
22 lowa	4	1	ferror or an arrangement of the con-
23 Missouri	4	1	5 5
24 New York***	5	0	5
25 California	4	0	4
26 Louisiana	4	0	4
27 Michigan	4	0	4
28 Maryland	3	. 0	3
29 Mississippi	3	0	3
30 Rhode Island	3	0	3
31 West Virginia	3	0	3
32 Kansas	2	1	3
33 Maine	2	1	3
34 Oregon	1	2	3
35 Delaware	2	0	
36 Idaho	2	0	2 2
37 New Hampshire	2	0	2
38 Tennessee	2	0	1.6
39 Florida	1	0,6	1.6

^{* 21} RCDs as part-time included.

^{**} effective on February 2010

^{***} NYS CQCAPD - Overall 103 FTEs. For D/HH Council, 5 FTEs sharing responsibilities with other councils.

6.2 Staff Hearing Status

Top five (5) state agencies that have best percentage of Deaf and Hard of Hearing employees hired are Tennessee, Mississippi, Rhode Island, Nevada, and Colorado. The majority of employees have normal hearing.

Table 6.2 Rank by percentage of all Deaf, Hard of Hearing, Late Deafened, DeafBlind, and D/HH plus Disabilities.

										MAT'DA		Hour.	
		0	1		A 33 - 5	3.9				HD.	· (2-1 · · .	. 50	10.5
1	Tennessee	1	50%	1	50%	0	0%	0	0%	2	100%	0	0%
2	Rhode Island	2	67%	0	0%	0 !	0%	Ŏ	0%	2	67%	1	33%
3	Mississippi	1	33%	n	0%	0 :	0%	1	33%	2	67%	1	33%
4	Nevada	5	47%	; 1	9%	1	9%	0	0%	7	66%	3.56	34%
5	Colorado*	2	33%	Ö	0%	0	0%	2	33%	4	66%	2	33%
6	Pennsylvania	3	60%	0	0%	0	0%	Ô	0%	3	60%	2	40%
7	Minnesota (Comm.)	2	40%	0	0%	ō	0%	1 1	20%	3	60%	2	40%
8	Utah	9	41%	2	9%	1	5%	1 1 1	5%	13	59%	9	41%
9	New Mexico	5	36%	3	21%	Ö	0%	1 0	0%	8	57%	6	43%
10	Indiana**	7	29%	6	25%	Ö	0%	Ŏ	0%	13	54%	11	46%
11	Kentucky	5 .	38%	1	8%	1	8%	Ō	0%	7	54%	: 6	46%
12	New Hampshire	1	50%	Ö	0%	0	0%	Ŏ	0%	1	50%	1	50%
13	Kansas	: - <u></u>	50%	0	0%	0	0%	0	0%	1	50%	1 1	50%
14	Idaho	1	50%	0	0%	0	0%	0	0%	1	50%	1	50%
15	Delaware	1	50%	0	0%	0	0%	Ö	0%	1	50%	1	50%
16	Michigan	1	25%	1	25%	0	0%	ŤŎ	0%	2	50%	2	50%
17	lowa	2	44%	0	0%	0 1	0%	Ŏ	0%	2	44%	2.5	56%
18	Wisconsin	2	22%	0	0%	2	22%	0	0%	4	44%	5	56%
19	Illinois	3	43%	0	0%	. 0	0%	Ŏ	0%	3	43%	4	57%
20	Arizona	4	33%	1	8%	0	0%	Ŏ.	0%	5	42%	7	58%
21	Washington	6	35%	Ö	0%	0	0%	1 1	6%	7	41%	10	59%
22	Missouri	1	20%	1	20%	0	0%	Ö	0%	2	40%	3	60%
23	Massachusetts	14	24%	7	12%	2	3%	Ŏ	0%	23	39%	36	61%
24	Texas	6	33%	1	6%	0	0%	0	0%	7	39%	11	61%
25	North Carolina	19	30%	4	6%	0	0%	1 1	2%	24 :	38%	39	62%
26	Florida	. 0	0%	0	0%	0,6	38%	o	0%	0.6	38%	1	63%
27	Nebraska	3	27%	1	9%	0.0	0%	Ŏ	0%	. 4	36%	7	64%
28	Maryland	0	0%	· ¦	33%	. 0 -	0%	0	0%	1 1	33%	2	67%
20			/ <u></u> -	:	·			,	L	 			f
29	Minnesota (DHHSD)	17	32%	0	0%	0	0%	0	0%	17	32%	36	68%
30	New York ***	0	0%	1	25%	0	0%	0	0%	1	25%	4	100%
31	California	1	25%	Ò	0%	0 ;	0%	0	0%	1 1 .	25%	3	75%
32	New Jersey	2	22%	0	0%	0	0%	0	0%	2	22%	7	78%
33	Virginia	1	9%	1	9%	1	9%	0	0%	3 .	17%	8	73%
34	Hawaii	1	6%	1	6%	0	0%	ō	0%	2 .	13%	14.5	91%
35	West Virginia	0	0%	Ō	0%	0	0%	0	0%	0	0%	3	100%
36	Oregon	Ŏ	0%	0	0%	0	0%	0	0%	0	0%	3	100%
37	Maine	ō	0%	0	0%	0	0%	0	0%	0	0%	, 3	100%
38	Louislana	0	0%	Ō	0%	0	0%	0	0%	0	0%	. 4	100%
39	Connecticut	0	0%	. 0	0%	0	0%	0	0%	0	0%	49	100%
-	The same of the sa	<u> </u>	day wasawaaamiinasuuwe		A. Ma. Mariano (r. 1897 mari	The state of the s	····	Total	······································	178.6	37%	311.56	63%

^{*} effective on February 2010

^{** 21} RCDs as part-time included.

^{***} NYS CQCAPD - Overall 103 FTEs. For D/HH Council, 5 FTEs sharing responsibilities with other councils

6.3 Staff Position Titles Other Than Administrator

State :	Staff Position Time Office Flate Administratory
	Deputy Director, Assistant to the Executive Director, Business Manager, Special Project Specialist, Administrative Assistant, Deaf Specialist, Hard of Hearing Specialist, Licensing/Certificate Coordinator, Account Payable, Information Assessment Coordinator, AZTEDP Program Planner, and Public Relations Coordinator.
California	Deputy Director, Staff Services Manager, Staff Services Analyst, and Associate Governmental Program Analyst
Colorado	Legal Auxiliary Services Manager, Telecommunications Equipment Distribution Program Coordinator, Sign Language Interpreter, Technical Assistance Specialists (2), and Legal Auxiliary Services Coordinator
Delaware	Public Information Officer and Administrative Support Specialist
Florida	Program Assistant and Outreach and Education Coordinator.
Hawaii	Program and Policy Development Coordinator, Program Specialists (3), Communication Access Specialist, Communication Access Technician, Facility Access Specialists (4.5), Planner, Secretary, Clerk, Coordinator, and Assistant Coordinator
Idaho	Administrative Assistant
Illinois	Assistant Director, Personnel Manager, Legal Counsel, Program Coordinator, Project Coordinator, Interpreter Coordinator, and Executive Secretary.
Indiana	Program Director, Program Consultants, Counselors and Secretaries
lowa	Secretary, Disability Consultants (3)
Kansas	Interpreter QA Coordinator, and Information Referral Specialist
Kentucky	Executive Staff Assistant, Internal Policy Analyst, Interpreter Referral Specialist, Information Coordinators (2), Executive Secretary, Executive Interpreter, Interpreter II, Network Analyst, Document Processing Specialist, Administrative Specialist, and Information Office Supervisor.
Louisiana	Program Coordinator, Program Specialist, and Administrative Program Specialist
Maine	Administrative Assistant and Central Office Consultant
Maryland	Assistant Director, and Special Assistant
Massachusetts	Deputy Commissioner of Program and Policy, Deputy Commissioner of Administration and Finance, Administrative Assistant, Case Manager, Staff Interpreter, Interpreter/CART Specialist, Department Supervisor, Director of Interpreting Services, Director of Case Management, Project Coordinator, Program Coordinator, Human Resources Liaison, Accountant, Accounting Clerk, Business Manager, Contract Manager, Communication Access Outreach Training Specialist, and Screening and Evaluation Coordinator
Michigan	Interpreter, Interpreter Coordinator, and Hard of Hearing Specialist
Minnesota (Comm.)	Public Policy Coordinator, Education Outreach Director, Technology Access Specialist, and Office Coordinator
Minnesota (DHHSD)	Assistant Director, Regional Managers, Mental Health Director, Program Development Supervisor, Telephone Equipment Administrator, Program Planner, Staff Interpreters, Administrative Assistants, Program Consultants, TED Specialists, Deaf-Blind Specialist, Office Liaison, and Mental Health Specialists.
Mississippi	Assistant Administrative II and full-time interpreter
Missouri	Interpreter Certification Coordinator, Workshop/Training Specialist, Information Specialist/Staff Interpreter, and Executive Secretary
Nebraska	Field Representatives, Mental Health Specialist, Business Manager, Staff Assistants, and Administrative Assistant
Nevada	Management Staff (.24 FTE), Support Staff (.32 FTE), Program Administration, Office Manager, Regional Supervisor, Case Manager Specialists, and Communication Support Staff
New Hampshire	Secretary

6.3 Staff Position Titles Other Than Administrator (continued)

New Mexico	Chief Financial Officer, Service Coordinator, Las Cruces Office Coordinator, Service Coordinators (2), Director of Special Projects, Director of Public Policy and Advocacy, Director of Telecommunication and Technical Assistance, Director of Communication Access and Development, Office Administrative Assistant, Telephone Distribution Program Specialist, Information and Referral Specialist, Public Education and Outreach Specialist, Financial Coordinator, and Business Operations Specialist.
New Jersey	Executive Assistant, Secretarial, Deaf and Hard of Hearing Specialists
New York	Attorneys, social workers, policy analysts, nurses, fiscal analysts, division directors, administrative officer, personnel administrator, mail clerks, administrative assistants, and agency director.
North Carolina	Office Assistant, Program Assistant, Technology Resource Coordinator, Emergency Preparedness Coordinator, Planner/Evaluator, Business Manager, Communication Access Manager, Human Resources Manager, Information Technology Specialist, Hard of Hearing Services Manager, Community Resource Program Manager, Telecommunication Resources Program Manager, Equipment Distribution Service Coordinator, Staff Interpreter, Director's Interpreter, Regional Center Manager, Deaf Services Specialist, Hard of Hearing Services Specialists, Deaf-Blind Services Specialist, Interpreter Services Specialist, Telecommunication Consultant, and Community Accessibility Consultant.
Oregon	Program Coordinator, part-time back-up/support for coordinator, manager, and trainer.
Pennsylvania	Administrative Assistant, Representatives (3)
Rhode Island	Program Manager and Interpreter/CART Referral Specialist
Tennessee	Secretary
Texas	Financial Services Liaison, Interpreter, BEI Program Administrator, Interpreter Certification Administrative Technicians (2), Communication Access Administrative Technician, Communication Access Specialist, Direct Services Program Specialist, Hard of Hearing Specialist, Outreach Development Specialist, STAP.Office Administrator, STAP Program Specialists (2), and STAP Administrative Technicians (5)
Utah	Secretaries, deaf facilities supervisor, interpreters, interpreter certification manager, counselors, case managers, outreach position, deaf program specialists, hard of hearing program specialists, certified deaf interpreter, language mentors for interpreter, and Training Technology specialist.
Virginia	Administration & Policy Manager, Relay & Technology Manager, Business Manager, Outreach Manager, Technology Programs Specialist, VQAS Programs Specialist, Outreach Specialist, Program Support Technician, ISP Coordinator, and CapTel Specialist.
Washington	Assistant Director, Fiscal Officer, Executive Assistants (6), Program Managers (2), Program Support, Information Technology (IT) Manager, IT Network Specialist, IT Database Specialist, Office Assistant, and Customer Service Representative.
West Virginia	Deputy Director and Secretary
Wisconsin	Human Services Program Coordinator, Regional Coordinator, Administrative Assistant, and Interpreter.

7.0 Services

7.1 General Services

The top five (5) services provided by among 39 state agencies are Information and Referral (95%), Advocacy (90%), Deaf Awareness/Orientation/Training (79%), Technical Assistance (77%), and Interpreter Referral (77%).

Table 7.1 - General Services

	Services:	G.N	₩-
1 [nformation and Referral	37	95%
2 /	Advocacy	35	90%
3 [Deaf Awareness/Orientation/Training	31	79%
4 [Technical Assistance	30	77%
5 I	nterpreter Referral	28	72%
6	Assistive Technology	27	69%
7	nterpreter Directory	25	64%
8 (0	CART Referral	25 .	64%
9 8	Services to Hard of Hearing	24	62%
10 (Client Assistance	24	62%
11 ×	Adult/Community Education	20	51%
12 L	ending Library	19	49%
	nterpreter Training and Workshop	18	46%
15 N	Newsletter	18	46%
16 E	Equipment Loan	18	46%
17 Ï	nterpreter Qualifying and Licensing	16	41%
	Felecommunication Distribution Program	16	41%
	Senior Citizens Services	15	38%
20 E	mergency needs	14	36%
	Deaf-Blind Services	13	33%
22 Î	nterpreter Services (direct)	12	31%
23 F	Research	12	31%
24	Deaf Festival	10	26%
25	Sign Language Instructions/Classes	8	21%
26	Counseling	7	18%
27 F	Relay Service	5	13%
28	Job Development and Placement	5	13%
29	√ideo Remote Interpreting Service	4	10%
30 L	_egislation affecting community- direct lobbing	3	8%
	Community Outreach	3	8%
	Remote CART Service	2	5%
33	Accessibility to State Agencies	2	5%
34 E	Equipment Program contracted by Division	1	3%
	Case Management Services for Adults	1	3%
36 (Children's Specialists	1	3%
	Communication Access Technology and Training Services	∵ 1 '	3%
	Deaf and Hard of Hearing Independent Living Services	1 .	3%
39 (Communication Services	1	3%
40	Quality Assurance Screening	1	3%

7.2 Relay Services

The State Agencies identified are responsible to oversee the State Relay Service in various forms.

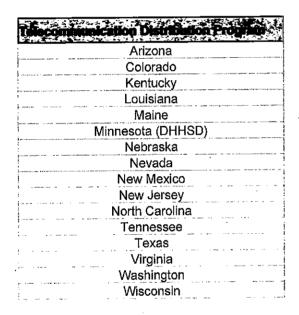
Table 7.2 - Overseeing State Relay Services



7.3 State Telecommunication Distribution Program

The State Agencies identified are in charge of Telecommunication Distribution Program.

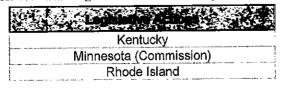
Table 7.3 - Telecommunication Distribution



7.4 Legislative Actions by the State Agencies

The State Agencies identified are allowed by the statutes to initiate, create, and lobby the legislation at the General Assembly.

Table 7.4 - State Agencies Allowed to lobby the legislations



7.5 Interpreter Referral

The State Agencies identified provide the interpreter referral services in various ways. Some provide regular interpreter referral services. Some provide interpreter referrals to State departments/agencies only, some provide for state courts only, some maintain a list of interpreters for distribution purposes, some are responsible to handle registrations of interpreters who work in the state.

Table 7.5 - Interpreter Referral

Interpreter leaves	به شد میشد می اواد
Arizona	
California	A CONTRACTOR OF THE PARTY OF TH
Colorado	
Connecticut	
Idaho	
Illinois	
Kansas	
Kentucky	
Louisiana	
Maine	
Maryland	
Massachusetts	Section 1997
Michigan	MUNICIPALITY CONTRACTOR
Minnesota (DHHSD)	
Mississippi	
Nebraska	
Nevada	į
New Hampshire	, , , , , , , , , , , , , , , , , , ,
New Mexico	
New Jersey	
North Carolina	
Pennsylvania	
Rhode Island	
Tennessee	THE THE ATT AT MESSAGEMENT TO A SECSO
Texas	to the second section of the second section of the second sections
Utah	
Virginia	
A Statement Committee of Commit	

7.6 Interpret Qualifying and Licensing

The State Agencies identified have programs that issue certificates, licenses, and/or qualify interpreters in their respective states.

Table 7.6 - Interpreter Qualifying and Licensing

Interpreted College and Licensing
Arizona
Colorado
Illinois
Kansas
Kentucky
Louisiana
Massachusetts
Michigan
Missouri
Nebraska
New Hampshire
New Mexico
Pennsylvania
Texas
Utah
West Virginia

8.0 Demographic Information

81 Demographic—Deaf and Hard of Hearing Population

The information below with both percentages and data sources varies from state to state. All 39 state agencies need to agree on percentage for each category (Deaf, Hard of Hearing, and Deaf Blind) and which source they will use to compute the figure in their respective states. They need consistency as to how to compute the figures.

Table 9.1 - Rank by Deaf and Hard of Hearing Population

75.7			THE PARTY OF		TO THE PERSON NAMED IN	3.00
State	Population	H	The state of	Total Only	Holf Only	Deaf-Elling
1 California	36,700,000.00	3,800,000.00	2.0%	N/A	N/A	N/A
2 Texas	21,000,000.00	3,800,000.00	8.8%	2.3%	6.5%	N/A
3 Florida	18,881,445.00	3,000,000.00	16.0%	2.5% N/A	N/A	N/A
4 New York	19,490,297.00	g	N/A	N/A	N/A	N/A
5 Michigan	10,003,422.00	1,400,000.00	10.0%	: N/A	N/A	N/A
1 1 7 7	12,419,293.00		8.6%	N/A N/A	N/A	N/A
6 Illinois 7 North Carolina	9,000,000.00		15.3%	N/A	N/A	N/A N/A
1 —	5,633,597.00	1,000,000.00 957,711.00	17.0%	N/A	. N/A	<u>}</u>
8 Maryland	regional examination and an examination	4	17.0% N/A	+ ,,		N/A
9 Washington	6,287,759.00	880,286.00		N/A	N/A	N/A
10 New Jersey	8,682,661.00	800,000.00	8.6%	N/A	. N/A	N/A
11 Tennessee	5,464,458.00	780,373.00	7.0%	18%	N/A	N/A
12 Arizona	6,500,000.00	704,000.00	11.0%	N/A	N/A	; N/A
13 Virginia	7,769,089.00	675,910.00	8.7%	1%	N/A	N/A
14 Kentucky	6,000,000.00	645,000.00	11.0%	: N/A	N/A	N/A
15 Pennsylvania	12,448,279.00		N/A	: <u>N/A</u> .	N/A	N/A
16 Missouri	5,800,310.00	580,000.00	10.0%	1%	9%	N/A
17 Massachusetts	6,349,097.00	546,022.00	8.6%	0.23%	N/A	N/A
18 Minnesota (Comm.)	5,000,000.00	500,000.00	10.0%	N/A	N/A	N/A
19 Wisconsin	5,000,000.00	500,000.00	10.0%	N/A	N/A	N/A
20 Minnesota (DHHSD)	5,000,000.00	497,229.00	10.0%	1%	9%	N/A
21 Indiana	6,195,643.00	495,651.00	N/A	N/A	N/A	N/A
22 Colorado	4,550,688.00	418,000.00	8.6%	0.9%	7.7%	N/A
23 Louislana	4,400,000.00	400,000.00	10.0%	1%	N/A	N/A
24 New Mexico	1,984,356.00	337,340.00	16.0%	2%	14%	N/A
25 Kansas	2,700,000.00	270,000.00	12.0%	10%	N/A	N/A
26 lowa	2,926,324.00	229,131.00	8.0%	0.9%	7.1%	N/A
27 Connecticut	3,501,252.00	208,000.00	8.0%	6%	2%	N/A
28 Utah	2,233,169.00	199,822.00	10.0%	1.7%	8.8%	N/A
29 Nevada	2,414,807.00	193,184.56	8.0%	<u>N/A</u>	. N/A	N/A
30 Oregon	3,790,060.00	179,000.00	N/A	N/A	<u>N/A</u>	N/A
31 Idaho	1,600,000.00	137,000.00	8.6%	1.6%	7%	N/A
32 Maine	1,300,000.00	105,000.00	10.0%	N/A	N/A	N/A
33 New Hampshire	1,700,000.00	101,000.00	10.0%	: N/A	N/A	N/A
34 Rhode Island	1,011,960.00	87,028.00	8.6%	N/A	N/A	N/A
35 Hawaii	1,288,198.00	47,817.00	N/A	N/A	N/A	N/A
36 Delaware	873,092.00	31,000.00	N/A	N/A	N/A	N/A
37 Mississippi	2,921,088.00	20,000.00	N/A	N/A	N/A	N/A
38 Nebraska	1,783,432.00	11,630.00	N/A	N/A	N/A	N/A
39 West Virginia	1,800,000.00	Unknown	N/A	N/A	N/A	N/A
		Average:	10.0%	3%	8%	0%

8.2 Demographic — Data Sources to be Used for Deaf and Hard of Hearing Population

Table 9.2 - Data Sources Used by States

State 4	Data Sources
Arizona	U.S. Census Bureau
California	State Department of Finance Estimates - 1990 and U.S. Census - 2008
Colorado	U.S. Department of Health and Human Services - July 2007
Connecticut	General Population from CT Dept of Health - 2008
Delaware	US Census Sensory Data - 2006 and US Census Bureau - July 2008
Florida	Florida Legislature Economic and Development Resource.
Hawaii	D/HH population from Gallaudet University Library FAQ - June 2004
Idaho	Formula set-forth by Gallaudet Research Institute (GRI)
Illinois	United States Department of Health and Human Services at 8.6%, Gallaudet University Research Institute, the Centers for Disease Control and Prevention, and National Center for Health Statistics.
Indiana	2003 US Census Bureau
lowa	US Census
Kansas	Gallaudet Research Institute
Kentucky	US Census, University Research as of 2007
Louisiana	US Census - 07/08
Maine	National Institute on Deafness and Communication Disorder 2002
Maryland	US Census estimates for 2008
Massachusetts	US Department of Commerce, Bureau of the Census, 2000 Census- March 2001, National Center for Health Statistics
Michigan	Contracted State Survey
Minnesota (Comm.)	National Center for Health Statistics - 2006
Minnesota (DHHSD)	
. Mississippi	US Census Bureau & Gallaudet University Research Institute
Missouri	US Census Bureau - 2007, 10% inaccurate, CDC indicates better % is 14% including institutionalized persons
Nebraska	General Population from US Census 2008. D/HH population based on a number of registrations for various programs that Nebraska Commission offered in the past.
Nevada	
New Hampshire	US Census Bureau - 2000
. New Mexico	
New Jersey	US Center for Health Statistics - 1994
New York	US Census - 2008 and NYSCQCAPD's website
North Carolina	15.32% for age 18 and up only. US Census Bureau and 2008 Series 10 report data from www.cdc.gov/nchs/nhis.htm
Oregon	US Census
Pennsylvania	US Census - 2000 and US Census 1990

8.2 Demographic — Data Sources to be Used for Deaf and Hard of Hearing Population (Continued)

Table 9.2 - Data Sources Used by States (continued)

State -	
Rhode Island	US Census 2001, Nat'l Center for Health Statistics- Nat'l Health Interview Survey-1994
Tennessee	1990 Census (figures were taken from the Tennessee Statistical Abstract 1994/1995)
Texas	2005 Census and 2005 National Health Interview Survey
Utah	US Census Bureau 2000
Virginia	National Center for Health Statistics - 2005
Washington	US Census - general population, Gallaudet Research Institute 2005 on D/HH
West Virginia	US Census Bureau
Wisconsin	US Census

9.0 Agency Website and E-Mail Addresses

9.1 Agency Website Addresses

Table 8.1 - Agency Website Addresses

Arizona	www.acdhh.org
California	www.cdss.ca.gov/cdssweb/PG145.htm
Colorado	www.coloradodeafcommission.com
Connecticut	www.ct.gov/cdhi
Delaware	www.delawareworks.com/dvr/services/dodhh.shtml
Florida	www.fccdhh.org
Hawaii	www.hawaii.gov/health/dcab
Idaho	www.cdhh.idaho.gov
Illinois	www.idhhc.state.ll.us
Indiana	<u>www.dhhs.in.gov</u>
Iowa	www.dsci.iowa.gov
Kansas	www.srskansas.org/kcdhh
Kentucky	www.kcdhh.org
Louisiana	www.dss.state.la.us
Maine	www.maine.gov/rehab/dod
Maryland	www.odhh.maryland.gov
Massachusetts	www.state.ma.us/MCDHH
Michigan	www.mcdc-dodhh.org
Minnesota (Comm.)	www.mncdhh.org
Minnesota (DHHSD)	<u>www.dhhsd.org</u>
Mississippi	www.odhh.org
Missouri	www,mcdhh.mo,gov
Nebraska	www.ncdhh.ne.gov
Nevada	<u>www.dhhs.nv.gov</u>
New Hampshire	www.ed.state.nh.us
New Mexico	www.cdhh.state.nm.us
New Jersey	www.state.nj.us/humanservices/ddhh/
New York :	www.cqcapd.state.ny.us
North Carolina	www.ncdhhs.gov/dsdhh/
Oregon	www.oregon.gov/DHS/odhhs/index.shtml
Pennsylvania	www.dli.state:pa.us,Keyword; ODHH
Rhode Island	www.cdhh.ri.gov
Tennessee	www.tennessee.gov/humanserv/rehab/cc6.html
Texas	www.dars.state.tx.us/dhhs
Utah	www.deafservices.utah.gov
Virginia	www.vddhh.org
Washington	http://odhh.dshs.wa.gov
West Virginia	www.wvdhhr.org/wvcdhh
Wisconsin	http://dhs.wisconsin.gov/sensory/

9.2 Agency E-mail Addresses

These email addresses are used by the public to contact the agency. Specific individual's email address is not included.

Table 8.2 - Agency E-mail Addresses

State .	Agency E-Mail Addresses
Arizona	info@acdhh.state.az.gov
California	deaf.access@dss.ca.gov
Colorado	email.ccdhh@state.co.us
Connecticut	cdhi@ct.gov
Hawaii	dcab@doh.hawaii.gov
Illinois	dhh.webmaster@illinois.gov
lowa	dhr.dsci@iowa.gov
Kentucky	info_svcs@ky.gov
Maryland	odhh@gov.state.md.us
Massachusetts	See website for link to submit msgs
Michigan	DODHH@Michigan.gov
Minnesota (Comm.)	mncdhh.info@state.mn.us
Missouri	mcdhh@mcdhh.mo.gov
New York	webmaster@cgcapd.state.ny.us
North Carolina	DSDHH.Information@ncmail.net
Oregon	info.odhhs@state.or.us
Pennsylvania	ra-li-ovr-odhh@state.pa.us
Rhode Island	cdhh@cdhh.ri.gov
Tennessee	TCDHH.Council.DHS@tn.gov
Virginia	frontdsk@vddhh.virginia.gov
Washington	odhh@dshs.wa.gov
West Virginia	wvcdhh@wvdhhr.org

10.0 Agency Contact List

Arizona

Arizona Commission f/t D/HH.
1400 W. Washington Street, Room 126
Phoenix, AZ 85007
800-352-8161 TOLL - V/TTY
602-542-3323 V/TTY
866-948-7035 VP
602-542-3380 FAX
info@acdhh.state.az.gov

California

Office of Deaf Access 744 P Street, M.S. 8-16-91 Sacramento, CA 95814 916-653-7651 TTY 916-653-8320 VOICE 916-653-4001 FAX deaf.access@dss.ca.gov

Colorado

Colorado Commission f/t D/HH 1575 Sherman Street, 2nd Floor Denver, Colorado 80203 303-866-4734 TTY 720-457-3679 VP 303-866-3824 VOICE 303-866-4831 FAX email.ccdhh@state.co.us

Connecticut

Commission on the D/Hi P.O. Box 330730 67 Prospect Avenue Hartford, CT 06133 800-708-6796 TOLL 860-231-8169 TTY 860-231-8756 VOICE 860-231-8746 FAX cdhi@ct.gov

Delaware

Delaware Office f/t D/HH
Division of Vocational Rehabilitation
4425 North Market Street
Wilmington, DE 19802-1307
302-761-8275 TTY
302-504-4741 VP
302-761-8275 VOICE
302-761-6611 FAX
Loretta.Sarro@state.de.us

Florida

Florida Coordinating Council f/t D/HH 4052 Bald Cypress Way, Bin A06 4025 Esplanade Way, Room 235.10 Tallahassee, FL 32399-1707 866-602-3275 TOLL 850-245-4914 TTY 850-245-4913 VOICE 850-921-8138 FAX MaryGrace_Tavel@doh.state.fl.us

Hawaii

Disability and Communication Access Board 919 Ala Moana Blvd. Room 101 Honolulu, Hawaii 96814 808-586-8121 TTY/Voice 866-552-3572 VP 808-586-8129 FAX dcab@doh.hawaii.gov

Idaho

Idaho Council f/t D/HH 1720 Westgate Drive, Suite A Boise, ID 83704 800-433-1323 TOLL/VOICE 800-433-1361 TTY 208-473-2122 VP 208-334-0952 FAX snows2@dhw.idaho.gov

Illinois

Illinois D/HH Commission 1630 S. 6th Street Springfield, IL 62703 877-455-3323 TOLL 217-557-4495 TTY 217-303-8010 VP 217-557-4495 VOICE 217-557-4492 FAX dhh.webmaster@illinois.gov

Indiana

Indiana, D/HH, Employment and Innovation 402 W. Washington Street IGCS – W453 Indianapolis, IN 46204 800-545-7763 TOLL 866-800-4634 VP 317-542-3325 FAX Rhonda.Marcum@fssa.in.gov

10.0 Agency Contact List (continued)

Iowa

Deaf Services Commission of Iowa Iowa Department of Human Rights 321 E 12th Street Des Moines, IA 50319 888-221-3724 TOLL 515-281-3164 TTY 515-598-7327 VP 515-281-3164 VOICE 515-242-6119 FAX dhr.dsci@iowa.gov

Kansas

Kansas Commission f/t D/HH 915 SW Harrison Street Docking State Office Building, 9 N Topeka, Kansas 66612 800-432-0698 TOLL 785-368-8046 TTY 785-246-5077 VP 785-368-8034 VOICE 785-368-7467 FAX

Kentucky

Kentucky Commission on the D/HH 632 Versailles Road Frankfort, KY 40601 800-372-2907 TOLL 502-573-2604 TTY/VOICE 502-385-0544 VP 502-573-3594 FAX Info svcs@ky.gov

Louisiana

Louisiana Commission for the Deaf 627 North Fourth Street, 2nd Floor P.O. Box 91297
Baton Rouge, LA 70821-9297
800-256-1523 TOLL – TTY/V
866-515-9928 VP
225-219-2949 FAX
ndedual@dss.state.la.us

Maine

Division f/t D, HH, and Late Deafened 42 Commerce Drive Augusta, Maine 04333 888-755-0023 TTY 866-760-8430 VP 207-623-7957 VOICE john.g.shattuck@maine.gov

Maryland

Maryland Governor's Office of the D/HH 217 E. Redwood Street Suite 1300
Baltimore, MD 21202
410-767-7756 TTY
443-453-5954 VP
410-767-6290 VOICE
410-333-1016 FAX
odhh@gov.state.md.us

Massachusetts

Massachusetts Commission f/t D/HH 150 Mount Vernon Street, Suite 550 Dorchester, MA 02125 800-530-7570 TTY 800-882-1155 VOICE 617-740-1700 TTY 866-970-7177 VP 617-740-1600 VOICE 617-740-1810 FAX

Michigan

Division on Deaf and Hard of Hearing 201 N Washington Sq. Suite 150 Lansing, MI 48913 877-499-6232 TOLL – TTY/VOICE 517-507-5223 VP 517-335-7773 FAX DODHH@Michigan.gov

Minnesota I

Commission of D/D-Blind/HH Minnesotans 444 Lafayette Road North St. Paul, MN 55155-3814 888-206-2001 TTY 651-964-2060 VP 651-431-5961 VOICE 651-431-7588 FAX mncdhh.info@state.mn.us

Minnesota II

Deaf and Hard of Hearing Services Division Elmer Andersen Human Services Building 540 Cedar Street St. Paul, MN 55155 888-206-6506 TTY 651-964-1452 VP 651-431-2355 VOICE 651-431-7417 FAX

10.0 Agency Contact List (continued)

Mississippi

Office on Deaf and Hard of Hearing

3895 Beasley Road

Jackson, MS 39213

601-898-7056 TTY

601-206-0228 VP

601-898-7057 VOICE

601-898-7098 FAX

benjamin.wagenknecht@mdrs.state.ms.us

Missouri

Missouri Commission f/t D/HH

1500 Southridge Drive

Suite 201

Jefferson City, MO 65109

573-526-5205 TTY/VOICE

573-526-5209 FAX

mcdhh@mcdhh.mo.gov

Nebraska

Nebraska Commission f/t D/HH

4600 Valley Road

Lincoln, NE 68510

800-545-6244 TOLL

402-471-3593 TTY/VOICE

402-471-3067 FAX

Nevada

Aging & Disability Svcs Div.- Disabilities Unit

3656 Research Way

Suite 32

Carson City, NV 89706

888-337-3839 TOLL

775-687-3388 TTY

775-687-4452 VOICE

775-687-3292 FAX

bahammond@adsd.nv.gov

New Hampshire

Office of the Deaf and Hard of Hearing

21 South Fruit Street, Suite 200

Concord, NH 03301

603-271-1483 TTY

646-863-7075 VP

603-271-3471 VOICE

603-271-7095 FAX

hdclanton@ed.state.nh.us

New Mexico

New Mexico Commission f/t D/HH Persons

2500 Louisiana Blvd.

Suite 400

Albuquerque, NM 87110

866-755-0242 TOLL

505-881-8824 TTY/VP/VOICE

505-881-8831 FAX

New Jersey

New Jersey Division of the D/HH

222 South Warren Street

Trenton, NJ 08625

609-984-7281 TTY/VOICE

609-498-7019 VP

609-633-3625 FAX

New York

NYS Interagency Coordinating Council for Services to Per-

sons who are Deaf, Deaf-Blind, or Hard of Hearing

NYS Commission on Quality of Care and Advocacy for Per-

sons with Disabilities

401 State Street

Schenectady, NY 12305-2397

800-624-4143 TOLL - TTY/VOICE

518-388-0691 VOICE

518-388-3375 FAX

webmaster@cqcapd.state.ny.us

North Carolina

NC Division of Services f/t D/HH

2301 Mail Service Center

Raleigh, NC 27699-2301

800-851-6099 TOLL

919-874-2212 TTY/VP/VOICE

919-855-6872 FAX

DSDHH.Information@ncmail.net

Oregon

Dept of Human Svcs D/HH Services Pgm

500 Summer Street NE

Salem, OR 97301

800-521-9615 TOLL

503-947-5183 TTY/VOICE

503-947-5184 FAX

Info.odhhs@state.or.us

10.0 Agency Contact List (continued)

Pennsylvania

Pennsylvania Office f/t D/HH 1521 North 6th Street Harrisburg, PA 17102 800-233-3088 TOLL – TTY/VOICE 717-783-4912 TTY/VOICE 866-572-2628 VP 717-783-4913 FAX ra-li-ovr-odhh@state.pa.us

Rhode Island

Rhode Island Commission on the D/HH One Capitol Hill, Ground Level Providence, RI 02908 401-222-1205 TTY 401-256-5511 VP 401-222-1204 VOICE 401-222-5736 FAX cdhh@cdhh.ri.gov

Tennessee

Tennessee Council f/t D/HH Citizens Plaza Building, 14th Floor 400 Deaderick Street Nashville, TN 37243 800-270-1349 TTY 615-313-4918 VOICE 615-532-4685 FAX TCDHH.Council.DHS@tn.gov

Texas

Office for D/HH Services P.O. Box 12904 Austin, TX 78711 512-407-3251 TTY 512-410-6556 VP 512-407-3250 VOICE 512-407-3299 FAX david.myers@dars.state.tx.us

Utah

Division of Services f/t D/HH Sanderson Community Center of the D/HH 5709 South 1500 West Taylorsville, UT 84123 801-313-6815 TTY 801-657-5200 VP 801-263-4861 VOICE 801-263-4865 FAX mcall@utah.gov

Virginia

Virginia Department f/t D/HH 1602 Rolling Hills Drive Suite 203
Richmond, VA 23229-5012
800-552-7917 TOLL
804-662-9502 TTY
804-325-1290 VP
804-662-9502 VOICE
804-662-9718 FAX
frontdsk@vddhh.virginia.gov

Washington

Office of the Deaf and Hard of Hearing P.O. Box 45301
Olympia, WA 98503-5300
800-422-7930 TOLL
360-902-8000 TTY/VOICE
360-339-7382 VP
360-902-0855 FAX
odhh@dshs.wa.gov

West Virginia

West Virginia Commission f/t D/HH
Capitol Complex
Building 6, Room 863
Charleston, WV 25305
866-461-3578 TOLL
304-558-1675 TTY/VOICE
304-205-0330 VP
304-558-0937 FAX
wvcdhh@wvdhhr.org

Wisconsin

Office for the Deaf and Hard of Hearing 1 West Wilson Street #451 Madison, WI 53703 888-701-1251 TTY 608-266-1865 VOICE

2009 Survey Questionnaire

WWW.MONKEYSURVEY.COM

Data Collection Process
October 2009-December 2009

GENERAL INFORMATION

Please fill in your State Agency contact information:

Name of Agency	•				
Address:					
Address2:					
City:	State:	Zip Code:			
Toll-free number	:() ber - TTY:()			•	
Main phone num	ber - TTY: ()				
Main phone num	ber - VP: ()	-			
Main phone num	ber - Voice: ()	-			
Fax number: ()				
Agency E-mail a	ddress:			-	
Website address:					
Agency founded	(MM/DD/YYYY)	: /	/	•	•
What is location	of your agency? U	nder what age	ncy or depar	rtment?	•
reorganized as re	your agency me equired by law or 1. Positive? Increas	executive ordese restrictions?	er? If yes, p Challenges	lease explair?	nded, downsized, or the impact on your

GENERAL ADMINISTRATION INFORMATION

Name of Administrator:
What is the title of administrator's position? (Examples: Executive Director, Commissioner, Director, etc.)
Hearing Status?
 □ Deaf □ Hard of Hearing □ Late-Deafened □ Hearing
Which one of the following listed below best matches your Administrator's position?
 Civil Service Classified Position Governor appointed position Report directly to Governor Other (please specific):
What is Annual Salary of the Administrator? Please check one. (confidential)
□ \$0 to \$25,000 □ \$25,001 to \$35,000 □ \$35,001 to \$45,000 □ \$45,001 to \$55,000 □ \$55,001 to \$65,000 □ \$65,001 to \$75,000 □ \$75,001 to \$85,000 □ \$85,001 and higher
Administrator's contact information:
E-mail address: Videophone: Phone - Voice: Fax number:

COMPOSITION OF COMMISSION, COUNCIL, OR BOARD

Number	of Members serving on commission, council, or board?
•	n = how many year?
Appoint	
	Governor
	Department Administrator
	Legislature Other (description)
. П	Other (please specify):
Does yo	ur law requires a majority number of deaf and hard of hearing representatives?
	Yes
	No
check al	oresentations on your commission, council, or board does your law require? (Please I that apply.) not required hard of hearing
	psychologist
	physician, otolaryngolsist state government official
	deaf organization representative
	hard of hearing organization representative
	late deafened organization representative
	general public
	deaf
	audiologist
	educator
	parent
	early intervention provider interpreter organization
	morproor organization

2009 Survey	of the State Commissions, Divisions, and Councils	Page 4
	hearing	
	local(regional) representative	
	Other (please specify):	
Minimu	m number of regular meetings in a year as required by the law.	
regular r	mmunication access accommodation(s) is automatically and routinely arranged for neeting? Any accommodation that would not require a special request in advance wheck all that apply.)	
	Interpreter	
	CART	
	Assistive Listening System (ALS)	
	Assistive Listening Device (ALD)	
	Video Remote Interpreter (VRI)	
	Remote CART	
	Other (please specify):	
Are the	members reimbursed for travel expenses?	
	Yes	
	No	
	Other (please specify):	
	FUNDING (Fiscal Year 2010)	
What is	your fiscal year cycle?	
	October 1 to September 30	

∃ Octobe	r 1	to	September	30
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-		
Other	(please specify):	
 Culvi	(product apoonly).	

[☐] January 1 to December 31☐ July 1 to June 30☐

Total authorized (enacted) budget for Fiscal Year 2010? (e.g.: \$560,000)
Is your authorized (enacted) budget good for
 One year (annual)? Two years (biennial)? Other (please specify):
Funding Source(s) (Please check all that apply.):
 State appropriation (What % is state funded?%) Federal Third party contract (MOU, Agreements, etc.) Grants (state and/or federal)
☐ Fees ☐ Donations/gifts ☐ Other (please specify):
STAFF AT YOUR AGENCY
Please fill in:
+ Number of full-time equivalent (FTE) staff positions (administrator included.):
+ Number of part-time positions Number of staff members who are deaf:
+ Number of staff members who are hard of hearing:
+ Number of staff members who are late-deafened:
+ Number of staff members who are hearing:
+ Number of staff members who are deaf, HoH, or LateD <u>PLUS</u> other disability:

	ist staff positions that are part of your agency (please attached if you have many sthat might not fit in this section.):
Please cl	heck all that apply closely and list other services that are not on this list.
	Adult/Community Education
	Advocacy
	Assistive Technology
	Counseling
	Client Assistance
. 🗆	Deaf Awareness/Orientation/Training
	Deaf Festival
	Equipment Loan
	Emergency Needs
	Information and Referral
	Interpreter Directory
	Interpreter Referral
	CART Referral
	Interpreter Services (direct)
	Interpreter Qualifying and Licensing
	Interpreter Training and Workshop
	Video Remote Interpreting Service Remote CART Service
	Job Development and Placement Lending Library
	Newsletter -
	Research
	Senior Citizens Services
	Deaf Blind Services
	Services to Hard of Hearing
	Sign Language Instruction/Classes
	Technical Assistance
	Relay Service
	Telecommunication Distribution program
	Other (please specify):

<u>**DEMOGRAPHICS**</u> Questions about your population in your State

→ What is the combined deaf and hard of hearing population estimate of your state?
→ What is the total general population in your state?:
→ What data source do you use to compute the estimates? U.S. Census Bureau? U.S. Department of Health? As of WHEN? Please be specific.:
→ What percentage do you use to compute the population of Deaf and Hard of Hearing?:
+ Please put 'N/A' if you do not have it, what percentage do you use to compute the population of DEAF only?:
→ Please put 'N/A' if you do not have it, what percentage do you use to compute the population of Hard of Hearing only?:
Please put 'N/A' if you do not have it, what percentage do you use to compute the population of Deaf-blind?:
Any general comments?



Toll-Free Numbers = 800, 888, 877, 866 prefixes (V/T) = (Voice/TTY) (VP) = Videophone

ARKANSAS Services for the Deaf and Hard of Hearing Arkansas Department of Career Education Arkansas Rehabilitation Services Division 26 Corporate Hill Drive Little Rock, Ark 72205 501-246-8259 – V/VP 501-686-9418 FAX Web: www.arsinfo.org Holly Ketchum Program Specialist for the Deaf and Hard of Hearing/SCD Email: Holly.Ketchum@arkansas.gov	ALABAMA N/A
ALASKA N/A	Arizona Commission for the Deaf and Hard of Hearing 100 N. 15 th Ave, Suite 104 Phoenix, AZ 85007 602-542-3383 V 602-364-0990 TTY 602-542-3380 FAX 480-264-0187 VP (928 and 520 area codes) VVeb: www.acdhh.org Email: info@acdhh.state.az.us Sherri Collins, M.Ed. Executive Director S.Collins@acdhh.az.gov

CALIFORNIA

Office of Deaf Access

California Department of Social Services 744 P Street, Mail Station 8-16-91 Sacramento, CA 95814

(916) 653-8320 (V) (916) 653-7651 (T) (916) 653-4001 (Fax)

Web:

http://www.cdss.ca.gov/cdssweb/PG145.htm

Email: deaf.access@dss.ca.gov

Tom Lee

Deputy Director

tom.lee@dss.ca.gov (916) 653-3780 (V)

Lisa Bandaccari

Chief of Office for Special Services

Lisa.Bandaccari@dss.ca.gov

COLORADO

Colorado Commission for the Deaf and Hard of Hearing

1575 Sherman Street, Garden Floor Denver, Colorado 80203 720-457-3679 VP 303-866-4824 VOICE 303-866-4831 FAX

Web: www.coloradodeafcommission.com

Email: email.ccdhh@state.co.us

Cliff Moers

Administrator

cliff.moers@state.co.us 720-949-7462 (VP/V)

Cheri Davis

Legal Auxiliary Services Program Manager

cheri.davis@state.co.us

CONNECTICUT

Board of Education Services for the Blind and Bureau of Rehabilitative Services

Commission

on the Deaf and Hearing Impaired

P.O. Box 330730 67 Prospect Avenue

Hartford, CT 06133

naruoru, Cr oorss

800-708-6796 TOLL 860-231-8169 TTY

000-257-0105 177

860-231-8756 VOICE

860-231-8746 FAX

Web: www.ct.gov/cdhi Email: cdhi@ct.gov

VACANT.

Executive Director

DELAWARE

Delaware Office

for the Deaf and Hard of Hearing

Division of Vocational Rehabilitation

4425 North Market Street

Wilmington, DE 19802-1307

302-761-8275 Voice & TTY (main line)

302-504-4741 VP (direct line)

302-761-8243 TTY (direct line)

302-761-6611 FAX

Web: http://dvr.delawareworks.com/dodhh.php

Email: Loretta.Sarro@state.de.us

Loretta Sarro

Public Information Officer

Loretta.Sarro@state.de.us

302-504-4741 VP

302-761-8243 TTY

FLORIDA

Florida Coordinating Council for the Deaf and Hard of Hearing

Mailing Address:

4052 Bald Cypress Way, Bin A25 Tallahassee, FL 32399-1746

Physical Address:

2585 Merchants Row Blvd., Room 205 D

Tallahassee, FL 32311 866-602-3275 TOLL

850-245-4914 TTY TOLL FREE

850-245-4913 VOICE 850-245-4124 FAX

Web: www.fccdhh.org

Email: MaryGrace Tavel@doh.state.fl.us

Mary Grace Tavel

Human Services Program Specialist

MaryGrace Tavel@doh.state.fl.us

850-245-4913 VOICE

GEORGIA N/A

HAWAII

Disability and Communication Access Board

919 Ala Moana Blvd. Room 101 Honolulu, Hawaii 96814 808-586-8121 TTY/Voice 808-447-1397 VP 808-586-8129 FAX

Web: www.hawaii.gov/health/dcab Email: dcab@doh.hawaii.gov

Francine Wai

Executive Director
francine.wai@doh.hawaii.gov
808-586-8121 VOICE

Kristine Pagano

Communication Access Specialist
kristine.pagano@doh.hawaii.gov

IDAHO

Idaho Council for the Deaf and Hard of Hearing

1720 Westgate Drive, Suite A Boise, ID 83704 800-433-1323 TOLL/VOICE 800-433-1361 TTY 208-473-2122 VP 208-334-0952 FAX

Web: www.cdhh.idaho.gov .

Steven Snow

Executive Director

snows2@dhw.idaho.gov

208-473-2122 VP/V

Cindy Schreiner

Administrative Assistant
schreinc@dhw.idaho.gov

ILLINOIS

Illinois Deaf and Hard of Hearing Commission

1630 S. 6th Street Springfield, IL 62703 217-557-4495 V/TTY 217-303-8010 VP 217-557-4492 FAX

Web: www.idhhc.state.il.us

Email: dhh.webmaster@illinois.gov

John Miller. Director

John.Miller@illinois.gov

INDIANA

Indiana, D/HH, Employment and Innovation

402 W. Washington Street IGCS - W453 Indianapolis, IN 46204 317- 542-3449 V/ VP 317-697-8568 Text Messaging 317-232-1427 TTY 317- 232-6478 FAX

Web: www.dhhs.in.gov

Rhonda Marcum, MSW Manager of Deaf. Hard of Hearing. Employment and Innovation

317-542-3325 VP/V 317-233-1566 FAX Rhonda.Marcum@fssa.IN.gov

IOWA

Deaf Services

lowa Department of Human Rights 321 E 12th Street Des Moines, IA 50319 888-221-3724 TOLL 515-281-3164 TTY/VOICE 515-242-6119 FAX

Web: www.dsci.iowa.gov Email: dhr.dsci@iowa.gov

Stephanie Lyons Disability Consultant Stephanie.Lyons@iowa.gov 515-282-3164 TTY/VOICE 515-598-7326 VP

Jill Avery Executive Office 3 515-242-6334 Jill.Avery@jowa.gov

KANSAS

Kansas Commission for the Deaf and Hard of Hearing

915 SW Harrison Street Docking State Office Building, 9 N Topeka Kansas 66612 800-432-0698 TOLL 785-368-8034 VOICE 785-368-7467 FAX

Web; http://www.dcf.ks.gov

Rebecca J. Rosenthal Executive Director

Rebecca.Rosenthal@dcf.ks.gov

785-246-5077 VP

KENTUCKY LOUISIANA Louisiana Commission for the Deaf **Kentucky Commission** on the Deaf and Hard of Hearing P.O. Box 44008 Baton Rouge, LA 70804 632 Versailles Road 800-256-1523 TOLL - V Frankfort, KY 40601 225-341-4837 VP 800-372-2907 TOLL 502-573-2604 TTY/VOICE 225-219-2949 FAX 502-385-0544 VP 502-573-3594 FAX Web: www.dhh.louisiana.gov/offices/?ID=387 Web: www.kcdhh.org Email: Info_svcs@ky.gov Naomi DeDual Executive Director Virginia L. Moore Naomi.dedual@la.gov Executive Director Virginia.moore@kv.gov 502-385-0544 VP 502-573-2604 VOICE MARYLAND MAINE Division for the Deaf, Hard of Hearing, and Maryland Governor's Office Late Deafened of the Deaf and Hard of Hearing 45 Commerce Drive 217 E. Redwood Street 150 State House station Suite 1300 Baltimore, MD 21202 Augusta, Maine 04333-0150 207-470-7668 VP 410-767-7756 TTY 207-623-7957 TTY 443-453-5954 VP 888-755-0023 TTY TOLL 410-767-6290 VOICE 207-287-5292 FAX 410-333-1016 FAX Web: www.maine.gov/rehab/dod/index.shtml Web: www.odhh.maryland.gov Email: odhh@gov.state.md.us Terry Morrell Lisa H. Kornberg Director Director lkornberg@gov.state.md.us Terry L.Morrell@maine.gov 443-453-5954 VP 410-767-1497 VOICE

MICHIGAN **MASSACHUSETTS** Division on Deaf and Hard of Hearing **Massachusetts Commission** 201 N Washington Sq. for the Deaf and Hard of Hearing Suite 150 600 Washington Street Lansing, MI 48913 Boston, MA 02111 877-499-6232 TOLL - TTY/VOICE 617-740-1711 TTY 517-507-5223 VP 617-326-7546 VP 517-335-7773 FAX 617-740-1611 VOICE 617-740-1810 FAX Web: www.michigan.gov/mcdc-dodhh Web: http://www.state.ma.us/mcdhh Email: dodhh@michigan.gov Heidi L. Reed Sheryl Emery Commissioner Director Heidi.Reed@state.ma.us Emerys2@Michigan.gov 517-507-5095 VP 877-499-6232 VOICE MINNESOTA MINNESOTA Deaf and Hard of Hearing Services Division Commission of Deaf, Deaf-Blind, Elmer Andersen Human Services Building and Hard of Hearing Minnesotans 444 Lafayette Road North 540 Cedar Street St. Paul, MN 55155-3814 St. Paul, MN 55155 888-206-6506 TTY 888-206-2001 TTY 651-964-2060 VP 651-964-1452 VP 651-431-5961 VOICE 651-431-2355 VOICE 651-431-7417 FAX 651-431-7588 FAX Web: www.dhhsd.org Web: Web: www.mncdhh.com Email: mncdhh.info@state.mn.us Bruce Hodek Division Director Mary Hartnett **Executive Director** bruce.hodek@state.mn.us 651-964-1452 VP Mary.Hartnett@state.mn.us 651-431-2355 VOICE 651-964-2060 VP 651-431-5965 VOICE

MISSISSIPPI	MISSOURI
Office on Deaf and Hard of Hearing 3895 Beasley Road Jackson, MS 39213 601-898-7056 TTY 601-206-0228 VP 601-898-7057 VOICE 601-898-7098 FAX Web: www.odhh.org Benjamin Wagenknecht Director bwagenknecht@mdrs.ms.gov 601-206-0228 VP	Missouri Commission for the Deaf and Hard of Hearing 1500 Southridge Drive Suite 201 Jefferson City, MO 65109 573-526-5205 TTY/VOICE 573-415-0085 VP 573-526-5209 FAX Web: http://www.mcdhh.mo.gov/ Email: MCDHH@mcdhh.mo.gov Ernest E. Garrett III Executive Director Ernest.Garrett@mcdhh.mo.gov
MONTANA	NEBRASKA
N/A	Nebraska Commission for the Deaf and Hard of Hearing 4600 Valley Road Lincoln, NE 68510 800-545-6244 TOLL 402-471-3593 TTY/VOICE 402-471-3067 FAX
	Web: www.ncdhh.ne.gov Peter J. Seiler, Ed.D. Executive Director Peter.seiler@nebraska.gov 402 261 2670 VP 402-471-3593 VOICE

NEVADA

Aging & Disability Services Division— Disabilities Unit

3656 Research Way Suite 32 Carson City, NV 89706 888-337-3839 TOLL 775-687-3388 TTY 775-687-4452 VOICE

Web: www.dhhs.nv.gov

775-687-3292 FAX

Betty A. Hammond Social Services Program Specialist II bahammond@adsd.nv.gov

775-687-4452 VOICE

NEW HAMPSHIRE

Office of the Deaf and Hard of Hearing

21 South Fruit Street, Suite 200 Concord, NH 03301 603-271-1483 TTY 646-863-7075 VP 603-271-3471 VOICE 603-271-7095 FAX

Web: www.ed.state.nh.us

H. Dee Clanton
State Coordinator
HDClanton@ed.state.nh.us
646-863-7075 VP
603-271-3471 VOICE

NEW MEXICO

New Mexico Commission for the Deaf and Hard of Hearing Persons 2500 Louisiana Blvd. Suite 400 Albuquerque, NM 87110 866-755-0242 TOLL 505-881-8824 TTY/VP/VOICE 505-881-8831 FAX

Web: www.cdhh.state.nm.us

Roth, Executive Director

866-691-0637 VP 505-881-8824 VOICE

NEW JERSEY

New Jersey Division of the Deaf and Hard of Hearing

222 South Warren Street Trenton, NJ 08625 609-984-7281 TTY/VOICE 609-498-7019 VP 609-633-3625 FAX

Web: www.state.nj.us/humanservices/ddhh/

David Alexander

Director
David.alexander@dhs.state.nj.us
609-498-7019 VP
609-984-7281 VOICE

NEW YORK	NORTH CAROLINA
NYS Interagency Coordinating Council for Services to Persons who are Deaf, Deaf-Blind, or Hard of Hearing NYS Commission on Quality of Care and Advocacy for Persons with Disabilities 401 State Street Schenectady, NY 12305-2397 800-624-4143 VOICE, Relay, Spanish 518-388-0691 VOICE 518- 388-2890 - Fax Web: www.cqc.ny.gov Rosemary Lamb, Director Division of Advocacy Rosemary.lamb@cqc.ny.gov	North Carolina Division of Services for the Deaf and Hard of Hearing 2301 Mail Service Center Raleigh, NC 27699-2301 800-851-6099 TOLL 919-874-2212 TTY/VP/VOICE 919-855-6872 FAX Web: www.ncdhhs.gov/dsdhh/Email: dsdhh.information@ncmail.net Jan Withers Director Jan.Withers@ncmail.net 919-518-9855 VP 919-874-2245 VOICE
NORTH DAKOTA N/A	OHIO N/A
OREGON	OKLAHOMA
Department of Human Services Deaf and Hard of Hearing Services Program 500 Summer Street NE Salem, OR 97301 503-947-5183 TTY/VOICE 503-947-5184 FAX Web: www.oregon.gov/DHS/odhhs/index.shtml Email: Info.odhhs@state.or.us Jeff Brownson Coordinator jeff.brownson@state.or.us	N/A

RHODE ISLAND
Rhode Island Commission on the Deaf and Hard of Hearing One Capitol Hill, Ground Level Providence, RI 02908 401-222-1205 TTY 401-256-5511 VP 401-222-1204 VOICE 401-222-5736 FAX Web: www.cdhh.ri.gov
Email: cdhh@cdhh.ri.gov
Steven A. Florio Executive Director SFLORIO@CDHH.RI.GOV 401-354-7651 VP/V
SOUTH DAKOTA N/A
TEXAS
Office for Deaf and Hard of Hearing Services Division for Rehabilitation Services 4900 North Lamar, Suite 2169 Austin, TX 78751 512-407-3251 TTY 512-410-6556 VP 512-407-3250 VOICE 512-407-3299 FAX Mailing Address:
P.O. Box 12904 Austin, TX 78711-2904
Web: www.dars.state.tx.us/dhhs Lori Breslow Director 512-410-6556 VP 512-407-3250 VOICE

WASHINGTON Office of the Deef and Hard of Heaving
WASHINGTON
Office of the Doof and Hard of Hagring
Office of the Deaf and Hard of Hearing P.O. Box 45301 Olympia, WA 98504-5301 800-422-7930 TOLL TTY/VOICE 360-902-8000 TTY/VOICE 360-339-7382 VP 360-902-0855 FAX Web: http://odhh.dshs.wa.gov Email: odhh@dshs.wa.gov
Eric Raff Director rafferic@dshs.wa.gov 360-915-5838 VP

WEST VIRGINIA	wisconsin
West Virginia Commission for the Deaf and Hard of Hearing 405 Capitol St., Suite 800 Charleston, WV 25301 304-558-1675 V/TTY 866-461-3578 V/TTY 304 558-0937 FAX 304-553-7384 VP	Office for the Deaf and Hard of Hearing Department of Health and Family Services One West Wilson Street, Room 451 P.O. Box 7851 Madison, WI 53707-7851 Web: http://dhs.wisconsin.gov/sensory
Web: www.wvdhhr.org/wvcdhh Email: wvdhhr.wvcdhh@sv.org Marissa J. Sanders Executive Director Marissa.J.Sanders@wv.gov	Linda Huffer Director Linda.huffer@wisconsin.gov 608-266-5641 VOICE
WYOMING N/A	

Date of this notice: 07-02-2010

Employer Identification Number: 27-2969298

Form: SS-4

Number of this notice: CP 575 E

NATIONAL ASSOCIATION OF STATE AGENCIES OFTHE DEAF AND HARD OF HE NASADHH * ERIC RAFF ODHH DIRECTOR PO BOX 45301 OLYMPIA, WA 98504

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 27-2969298. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, Tax Exempt Status for Your Organization, has details on the application process, as well as information on returns you may need to file. To apply for formal recognition of tax-exempt status, most organizations will need to complete either Form 1023, Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code, or Form 1024, Application for Recognition of Exemption Under Section 501(a). Submit the completed form, all applicable attachments, and the required user fee to:

Internal Revenue Service PO Box 192 Covington, KY 41012-0192

The Pension Protection Act of 2006 contains numerous changes to the tax law provisions affecting tax-exempt organizations, including an annual electronic notification requirement (Form 990-N) for organizations not required to file an annual information return (Form 990 or Form 990-EZ). Additionally, if you are required to file an annual information return, you may be required to file it electronically. Please refer to the Charities & Non-Profits page at www.irs.gov for the most current information on your filing requirements and on provisions of the Pension Protection Act of 2006 that may affect you.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub. Thank you for your cooperation.

Keen	this	part	for	vour	records.
MOCD		COLL L	$T \cap T$	your	TCCCTOR.

CP 575 E (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 E

999999999

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Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 07-02-2010 EMPLOYER IDENTIFICATION NUMBER: 27-2969298

FORM: SS-4

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INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 **Idalıldılalılılılılıl**ıllm**il**omililmilildi.

NATIONAL ASSOCIATION OF STATE AGENCIES OFTHE DEAF AND HARD OF HE NASADHH % ERIC RAFF ODHH DIRECTOR PO BOX 45301 OLYMPIA, WA 98504