that depressive symptoms, social isolation, and severe social isolation were more prevalent in adults with any objective VI measure compared to those without impairment. In adjusted models, objective vision measures were not associated with higher odds of depression or anxiety symptoms, though both outcomes were strongly associated with self-reported VI (OR: 1.82 [95% CI: 1.27 – 2.60], OR: 1.81 [95% CI: 1.30 – 2.53], respectively). In contrast, worse distance and near acuity (per 0.1 logMAR), and worse contrast sensitivity (per 0.1 logCS units) were associated with higher risk of being severely socially isolated (RRR: 3.79 [95% CI: 1.13 – 12.78], 3.26 [95% CI: 1.16 - 9.17], 2.82 [95% CI: 1.11 – 7.18], respectively), however, no associations were found with self-reported VI. This study demonstrates that worse vision is associated with symptoms of depression, anxiety, and social isolation among older US adults. Approaches are needed to enhance the psychological and social well-being of individuals with VI.