

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

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

Go to www.irs.gov/Form990 for instructions and the latest information.**2024****Open to Public Inspection**

A For the 2024 calendar year, or tax year beginning 09/01/2024 and ending 08/31/2025	
B Check if applicable: ☒ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization NATIONAL WILD TURKEY FEDERATION INC Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 535 GARY HILL ROAD City or town, state or province, country, and ZIP or foreign postal code EDGEFIELD, SC 29824 F Name and address of principal officer: KURT W DYROFF 535 GARY HILL ROAD, EDGEFIELD, SC 29824 H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list. See instructions. H(c) Group exemption number
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527	D Employer identification number 57-0564993 E Telephone number 803-637-3106 G Gross receipts \$ 64,188,667
J Website: WWW.NWTF.ORG	
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other	L Year of formation: 1973 M State of legal domicile: VA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE NATIONAL WILD TURKEY FEDERATION, INC (NWTF) IS DEDICATED TO THE CONSERVATION OF THE WILD TURKEY AND THE PRESERVATION OF OUR HUNTING HERITAGE.		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	276
	6	Total number of volunteers (estimate if necessary)	6	15,000
		7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a
b		Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	35,738,389	41,431,065
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	26,159,182	12,881,869
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	451,729	-639,520
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	737,535	660,373
	12		63,086,835	54,333,787
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,931,837	4,948,328
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	19,957,811	23,011,524
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25)	1,754,785	
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	39,406,830	32,321,558
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	63,296,478	60,281,410
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	-209,643	-5,947,623
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	31,014,692	31,831,916
	22	Net assets or fund balances. Subtract line 21 from line 20	9,615,212	16,380,059
		21,399,480	15,451,857	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date	
	KURT W DYROFF, Co-CEO Type or print name and title			
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	Check ☐ if self-employed PTIN
	Firm's name	Firm's EIN		
	Firm's address	Phone no.		

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2024)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐

- 1** Briefly describe the organization's mission: THE NWTF IS DEDICATED TO THE CONSERVATION OF THE WILD TURKEY AND THE PRESERVATION OF OUR HUNTING HERITAGE.

- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

- 4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

- 4a** (Code:) (Expenses \$ 42,304,075 including grants of \$ 4,948,328) (Revenue \$ 12,881,869)

THE NWTF IS DEDICATED TO THE CONSERVATION OF THE WILD TURKEY AND THE PRESERVATION OF OUR HUNTING HERITAGE. THE NWTF WORKS WITH GOVERNMENT AND AGENCY PARTNERS TO RESTORE WILD TURKEYS TO SUITABLE HABITAT AND MAINTAIN THAT HABITAT FOR FUTURE POPULATIONS OF UPLAND WILDLIFE.

- 4b** (Code:) (Expenses \$ 4,027,516 including grants of \$ 0) (Revenue \$ 0)

THE ORGANIZATION HAS 258,488 MEMBERS WITH A PRESENCE IN 50 STATES, CANADA AND 11 OTHER COUNTRIES. MEMBERS CAN JOIN THROUGH A VARIETY OF MEMBERSHIP CATEGORIES, INCLUDING A YOUTH MEMBERSHIP, REGULAR MEMBERSHIP AND SPONSOR MEMBERSHIP.

- 4c** (Code:) (Expenses \$ 4,513,144 including grants of \$ 0) (Revenue \$ 0)

THROUGH A VARIETY OF OUTREACH PROGRAMS, THE ORGANIZATION ACTIVELY EDUCATES THE PUBLIC ON THE VALUE OF HUNTING AND THE IMPORTANCE OF WILDLIFE CONSERVATION. THESE PROGRAMS INCLUDE: FOR YOUTH, JAKES (FOR AGES 12 AND YOUNGER), XTREME JAKES (AGES 13-17), WOMEN IN THE OUTDOORS (WOMEN 14 AND OLDER SEEKING HANDS ON OUTDOORS INSTRUCTION) AND WHEELIN SPORTSMEN (FOR SPORTSMEN AND WOMEN WITH DISABILITIES).

- 4d** Other program services (Describe on Schedule O.)
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

- 4e** Total program service expenses 50,844,735

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2 ✓	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	✓
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4 ✓	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	✓
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7 ✓	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 ✓	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	✓
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V	10 ✓	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a ✓	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	✓
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	✓
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	✓
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e ✓	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	✓
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b ✓	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	✓
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	✓
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	✓
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	✓
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	✓
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	✓
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	✓
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	✓
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 ✓	

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 320	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 1	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c ✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	276		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			✓
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

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

Section A. Governing Body and Management

	1a	18	1b	18	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b Enter the number of voting members included on line 1a, above, who are independent						
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?						✓
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?						✓
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?						✓
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						✓
6 Did the organization have members or stockholders?					✓	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?					✓	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?						✓
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
a The governing body?					✓	
b Each committee with authority to act on behalf of the governing body?					✓	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O						✓

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	✓	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	✓	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	✓	
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	✓	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	✓	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	✓	
13 Did the organization have a written whistleblower policy?	✓	
14 Did the organization have a written document retention and destruction policy?	✓	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	✓	
b Other officers or key employees of the organization	✓	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		✓
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed See Schedule O, Statement 1
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☐ Upon request ☐ Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.

KURT W DYROFF, (803)637-3106

535 GARY HILL ROAD, EDGEFIELD, SC 29824

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Kurt Dyroff	37.50									
Co-CEO (Conservation/Business Support)	0.00			✓				409,336	0	31,609
Jason Burckhalter	37.50									
Co-CEO (Marketing/Fundraising)	0.00			✓				409,112	0	31,832
Barry Woods	37.50									
National Director Of Event Fundraising	0.00				✓			174,667	0	31,094
Al Clark	37.50									
National Director Of Development	0.00				✓			174,897	0	28,705
Carol Frampton	37.50									
Chief Legal Services	0.00				✓			178,186	0	18,132
Chad Franklin	37.50									
Director of Field Operations	0.00					✓		144,397	0	28,248
Phillip Ferrare	37.50									
Director of Field Operation Northeast	0.00					✓		129,900	0	30,180
Greg Werner	37.50									
SR Director Of Information Technology	0.00				✓			148,473	0	9,005
Shawn McWilliams	37.50									
National Director of Product & Project Leadership	0.00					✓		127,934	0	22,392
Zachary Morton	37.50									
National Director of Development	0.00					✓		128,261	0	19,340
Lisa Wart	37.50									
Director of Human Resources	0.00					✓		136,953	0	7,450
Bryan Perry	3.25									
Chairman of the Board	1.00	✓		✓				0	0	0
Parks Shackelford	3.25									
President	1.00	✓		✓				0	0	0
Dal Dyches	3.25									
Vice President	0.00	✓		✓				0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Phil Savage	3.25									
Secretary	1.00	✓		✓				0	0	0
Marc Brinkmeyer	3.25									
Treasurer	0.00	✓		✓				0	0	0
David Baron	3.25									
Board Member	0.00	✓						0	0	0
Richard Childress	3.25									
Board Member	0.00	✓						0	0	0
William D'Alonzo	3.25									
Board Member	0.00	✓						0	0	0
Ray Davidson	3.25									
Board Member	0.00	✓						0	0	0
Linda Demmer	3.25									
Board Member	0.00	✓						0	0	0
Louis Gambale	3.25									
Board Member	0.00	✓						0	0	0
Craig Harris	3.25									
Board Member	0.00	✓						0	0	0
Chris Hinkle	3.25									
Board Member	0.00	✓						0	0	0
Ben Noble	3.25									
Board Member	0.00	✓						0	0	0
Ronnie Reagin	3.25									
Board Member	1.00	✓						0	0	0
Joe Shults	3.25									
Board Member	0.00	✓						0	0	0
Harlan Starr	3.25									
Board Member	1.00	✓						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Steve Uline	3.25									
Board Member	0.00	✓						0	0	0
1b Subtotal								2,162,116	0	257,987
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								2,162,116	0	257,987

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **30**

3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*

	Yes	No
3		✓
4	✓	
5		✓

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
FOREST FITNESS LLC, 5311 LOS POBLANOS LN NW, LOS RANCHOS, NM 87107	PROJECT GROUNDWORK	3,495,240
RSM US LLP, 5155 PAYSHERE CIRCLE, CHICAGO, IL 60674	IT PROJECT CONSULTING	2,217,954
FORESTRY FIRST LLC, 51 STATE HWY 112, HULETT, WY 82720	PROJECT GROUNDWORK	2,120,437
GE FORESTRY INC, 5315 MCLOUGHLIN DRIVE, CENTRAL POINT, OR 97502	PROJECT GROUNDWORK	1,668,600
CALIFORNIA DEER ASSOCIATION, 1884 KEYSTONE CT, REDDING, CA 96003	PROJECT GROUNDWORK	1,171,830

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **24**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a	0			
	b	Membership dues	1b	13,059,347			
	c	Fundraising events	1c	0			
	d	Related organizations	1d	15,479,942			
	e	Government grants (contributions)	1e	7,441,840			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	5,449,936			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 0			
	h	Total. Add lines 1a-1f		41,431,065			
	Program Service Revenue			Business Code			
2a		CONSERVATION PROJECTS	813312	5,310,696	5,310,696	0	0
b		BANQUET/EVENT SUPPORT	813312	3,935,279	3,935,279	0	0
c		PRODUCT/MERCH SALES	455000	1,642,562	1,642,562	0	0
d							
e							
f		All other program service revenue . .		1,993,332	1,874,859	118,473	0
g		Total. Add lines 2a-2f		12,881,869			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		196,890	0	0	196,890
	4	Income from investment of tax-exempt bond proceeds		0	0	0	0
	5	Royalties		0	0	0	0
	6a	Gross rents	(i) Real	0	0		
	b	Less: rental expenses	(ii) Personal	0	0		
	c	Rental income or (loss)		0	0		
	d	Net rental income or (loss)		0	0	0	0
	7a	Gross amount from sales of assets other than inventory	(i) Securities	0	750,000		
	b	Less: cost or other basis and sales expenses	(ii) Other	0	1,586,410		
	c	Gain or (loss)		0	-836,410		
	d	Net gain or (loss)		-836,410	-836,410	0	0
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18		0			
	b	Less: direct expenses		0			
	c	Net income or (loss) from fundraising events		0		0	0
	9a	Gross income from gaming activities. See Part IV, line 19		0			
	b	Less: direct expenses		0			
	c	Net income or (loss) from gaming activities		0	0	0	0
	10a	Gross sales of inventory, less returns and allowances		8,240,223			
	b	Less: cost of goods sold		8,268,470			
	c	Net income or (loss) from sales of inventory		-28,247	-14,124	-14,123	0
Miscellaneous Revenue			Business Code				
	11a	ADVERTISING	510000	688,620	0	356,010	332,610
	b						
	c						
	d	All other revenue		0	0	0	0
	e	Total. Add lines 11a-11d		688,620			
12	Total revenue. See instructions			54,333,787	11,912,862	460,360	529,500

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☒**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,833,178	4,833,178		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	115,150	115,150		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	1,286,757	969,211	248,157	69,389
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	16,944,289	12,762,778	3,267,786	913,725
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	596,570	449,349	115,051	32,170
9 Other employee benefits	2,899,056	2,183,627	559,097	156,332
10 Payroll taxes	1,284,852	967,776	247,790	69,286
11 Fees for services (nonemployees):				
a Management	0	0	0	0
b Legal	61,895	0	61,895	0
c Accounting	148,457	0	148,457	0
d Lobbying	266,372	0	266,372	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	0	0	0	0
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	1,571,385	0	1,571,385	0
12 Advertising and promotion	97,497	13,828	82,369	1,300
13 Office expenses	2,230,452	2,098,358	99,210	32,884
14 Information technology	862,630	766,518	83,801	12,311
15 Royalties	0	0	0	0
16 Occupancy	0	0	0	0
17 Travel	2,361,634	2,114,992	59,697	186,945
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	4,596,803	4,342,856	253,947	0
20 Interest	48,306	0	48,306	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	1,023,978	608,683	415,295	0
23 Insurance	0	0	0	0
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a <u>Banquet Support</u>	9,031,480	9,031,480	0	0
b <u>Administrative</u>	1,071,214	734,628	153,275	183,311
c <u>Membership</u>	923,459	826,327	0	97,132
d <u>Communications</u>	1,800,587	1,800,587	0	0
e All other expenses	6,225,409	6,225,409	0	0
25 Total functional expenses. Add lines 1 through 24e	60,281,410	50,844,735	7,681,890	1,754,785
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,832,450	1	1,683,226
	2 Savings and temporary cash investments	12,246,981	2	13,084,152
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,645,185	4	3,149,614
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	823,488	8	608,677
	9 Prepaid expenses and deferred charges	562,736	9	697,310
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 21,148,399		
	b Less: accumulated depreciation	10b 8,738,394	10c	12,410,005
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	31,647	15	198,932
16 Total assets. Add lines 1 through 15 (must equal line 33)	31,014,692	16	31,831,916	
Liabilities	17 Accounts payable and accrued expenses	3,316,761	17	4,424,689
	18 Grants payable		18	
	19 Deferred revenue	5,652,996	19	9,638,317
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	1,776,671
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	645,455	25	540,382
	26 Total liabilities. Add lines 17 through 25	9,615,212	26	16,380,059
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	21,316,261	27	15,368,638
	28 Net assets with donor restrictions	83,219	28	83,219
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	21,399,480	32	15,451,857
33 Total liabilities and net assets/fund balances	31,014,692	33	31,831,916	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	54,333,787
2	Total expenses (must equal Part IX, column (A), line 25)	2	60,281,410
3	Revenue less expenses. Subtract line 2 from line 1	3	-5,947,623
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	21,399,480
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	15,451,857

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		✓
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	✓	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		✓
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	✓	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	✓	

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization

NATIONAL WILD TURKEY FEDERATION INC

Employer identification number

57-0564993

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	36,776,700	44,425,338	33,239,385	35,738,389	41,431,065	191,610,877
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	36,776,700	44,425,338	33,239,385	35,738,389	41,431,065	191,610,877
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						191,610,877

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	36,776,700	44,425,338	33,239,385	35,738,389	41,431,065	191,610,877
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	38,696	13,474	200,750	451,404	196,890	901,214
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						192,512,091
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	99.53 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	99.61 %
16a 33¹/₃% support test—2024. If the organization did not check the box on line 13, and line 14 is 33 ¹ / ₃ % or more, check this box and stop here . The organization qualifies as a publicly supported organization		☒
b 33¹/₃% support test—2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 ¹ / ₃ % or more, check this box and stop here . The organization qualifies as a publicly supported organization		☐
17a 10%-facts-and-circumstances test—2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		☐
b 10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		☐
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

- 19a 33 $\frac{1}{3}$ % support tests—2024.** If the organization did not check the box on line 14, and line 15 is more than 33 $\frac{1}{3}$ %, and line 17 is not more than 33 $\frac{1}{3}$ %, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . ☐
- b 33 $\frac{1}{3}$ % support tests—2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 $\frac{1}{3}$ %, and line 18 is not more than 33 $\frac{1}{3}$ %, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D—Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020 . . .			
b Excess from 2021 . . .			
c Excess from 2022 . . .			
d Excess from 2023 . . .			
e Excess from 2024 . . .			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

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

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

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

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

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

Name of organization	Employer identification number (EIN)
NATIONAL WILD TURKEY FEDERATION INC	57-0564993

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

- Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- Political campaign activity expenditures. See instructions \$
- Volunteer hours for political campaign activities. See instructions

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	0													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	266,372													
c	Total lobbying expenditures (add lines 1a and 1b)	266,372													
d	Other exempt purpose expenditures	68,283,508													
e	Total exempt purpose expenditures (add lines 1c and 1d)	68,549,880													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1"> <thead> <tr> <th>IF the amount on line 1e, column (a) or (b), is:</th> <th>THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000	\$1,000,000.		
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:														
not over \$500,000	20% of the amount on line 1e.														
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	☐ Yes ☐ No													

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
c Total lobbying expenditures	214,964	230,304	239,937	266,372	951,577
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	0	0	0	0	0

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

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

Part IV	Supplemental Information
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Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

[illegible]

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

NATIONAL WILD TURKEY FEDERATION INC

Employer identification number

57-0564993

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). ☒ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area ☒ Protection of natural habitat ☐ Preservation of a certified historic structure ☒ Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a 49
b Total acreage restricted by conservation easements	2b 23,119
c Number of conservation easements on a certified historic structure included on line 2a	2c 0
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d 0
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	0
4 Number of states where property subject to conservation easement is located	11
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	☒ Yes ☐ No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	0
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	\$ 0
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	☒ Yes ☐ No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.	
(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.	
a Revenue included on Form 990, Part VIII, line 1	\$ 0
b Assets included in Form 990, Part X	\$ 0

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

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

a ☒ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other

c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements

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

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	19,137,634	9,431,334	4,591,219	1,267,319	1,223,832
b Contributions	1,230,445	8,754,043	5,135,855	1,064,477	75,000
c Net investment earnings, gains, and losses	1,184,154	1,546,266	2,098	107	97
d Grants or scholarships	0	0	0	0	0
e Other expenditures for facilities and programs	879,755	594,009	297,838	47,088	31,610
f Administrative expenses	0	0	0	0	0
g End of year balance	20,672,478	19,137,634	9,431,334	2,284,815	1,267,319

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment 80 %

b Permanent endowment 20 %

c Term endowment 0 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations?

(ii) Related organizations?

	Yes	No
3a(i)		✓
3a(ii)	✓	
3b	✓	

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

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	3,863,694		3,863,694
b Buildings	0	8,324,426	3,886,383	4,438,043
c Leasehold improvements	0	0	0	0
d Equipment	0	3,038,570	2,784,005	254,565
e Other	0	5,921,709	2,068,006	3,853,703
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				12,410,005

Part VII Investments—Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments—Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Operating lease liability	161,509
(3) Operating lease liability, net of current portion	26,221
(4) Due to related party	352,652
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	540,382

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☐

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

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

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part II, Line 5 - CONSERVATION EASEMENTS REPRESENTS RIGHTS TO RESTRICT THE USE, ACCESS, AND DEVELOPMENT OF CERTAIN PROPERTIES. THE FEDERATION IS OBLIGATED TO MONITOR EASEMENTS TO ENSURE THAT THE RESTRICTIONS ARE MAINTAINED. THE FEDERATION MONITORS THESE EASEMENTS IN THE NORMAL COURSE OF ITS OPERATIONS AND ASSOCIATED COST ARE EXPENSED AS INCURRED. THE PROPERTY OWNERS CONTRIBUTE FUNDS TO HELP WITH THE MONITORING COST AND THESE CONTRIBUTIONS ARE HELD IN THE ENDOWMENT AS TEMPORARILY RESTRICTED NET ASSETS. THE ESTIMATED VALUE OF EASEMENTS IS NOT INCLUDED IN THE COMBINED STATEMENT OF FINANCIAL POSITION BECAUSE THE EASEMENTS DO NOT REPRESENT A FUTURE ECONOMIC BENEFIT TO THE FEDERATION.

Schedule D, Part II, Line 9 - CONSERVATION EASEMENTS REPRESENTS RIGHTS TO RESTRICT THE USE, ACCESS, AND DEVELOPMENT OF CERTAIN PROPERTIES. THE FEDERATION IS OBLIGATED TO MONITOR EASEMENTS TO ENSURE THAT THE RESTRICTIONS ARE MAINTAINED. THE FEDERATION MONITORS THESE EASEMENTS IN THE NORMAL COURSE OF ITS OPERATIONS AND ASSOCIATED COST ARE EXPENSED AS INCURRED. THE PROPERTY OWNERS CONTRIBUTE FUNDS TO HELP WITH THE MONITORING COST AND THESE CONTRIBUTIONS ARE HELD IN THE ENDOWMENT AS TEMPORARILY RESTRICTED NET ASSETS. THE ESTIMATED VALUE OF EASEMENTS IS NOT INCLUDED IN THE COMBINED STATEMENT OF FINANCIAL POSITION BECAUSE THE EASEMENTS DO NOT REPRESENT A FUTURE ECONOMIC BENEFIT TO THE FEDERATION.

Schedule D, Part III, Line 1 - The Federation operates the Winchester Museum, a small museum available for viewing by the public on a limited basis. The museum contains displays about wild turkey species, hunting history and land conservation activities. The museum's collection includes objects that are available to the public or held for that purpose. The museum is housed in the Federation headquarters facility in Edgefield, South Carolina. Most of the museum's artifacts were acquired via donation between 1998 through 2012. The Museum's Collections Management Policy includes guidance on the documentation, preservation, care, and management of the collections and procedures related to the accession and deaccession of collection items. The Federation follows the recommendations of the American Alliance of Museums ("AAM") with regard to the Winchester Museum collection.

Schedule D, Part III, Line 4 - DISPLAYS OF HISTORIC TURKEY CALLS DONATED BY MASTER TURKEY CALL MAKERS NEIL COST

Part XIII - Supplemental Information (Continued)

AND M.L. LYNCH ARE ONE OF THE MUSEUM'S MOST TREASURED COLLECTIONS. THROUGH THESE EXHIBITS, VISITORS CAN EASILY VIEW THE EVOLUTION OF TURKEY CALLS SPANNING MORE THAN A CENTURY.

Schedule D, Part V, Line 4 - THE FEDERATION'S ENDOWMENT CONSISTS OF ONE FUND ESTABLISHED FOR A VARIETY OF PURPOSES. THIS DONOR RESTRICTED ENDOWMENT INCLUDES FUNDS CONTRIBUTED TO THE FEDERATION FOR THE LONG TERM BENEFIT OF THE FUTURE OF THE FEDERATION. AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR IMPOSED RESTRICTIONS.

SCHEDULE I
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

NATIONAL WILD TURKEY FEDERATION INC

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Sch I, Stmt 1							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	67
3	Enter total number of other organizations listed in the line 1 table	0

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

Cat. No. 50055P

Schedule I (Form 990) (Rev. 12-2024)

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

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

Attach to Form 990.

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

Employer identification number

57-0564993

Open to Public Inspection

OMB No. 1545-0047

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address	ALABAMA STATE CHAPTER 64 N Alabama Ave Ste B Monroeville, AL 36460	00-0000000	10,901	
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Other			
Name and address	ALABAMA WILDLIFE & FRESHWATER FISHERIES 64 NORTH UNION STREET MONTGOMERY, AL 36130	00-0000000	71,371	
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Turkey manage act			
Name and address	ALABAMA WILDLIFE FEDERATION 64 N UNION STREET MONTGOMERY, AL 36130	00-0000000	8,000	
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Land Purchase			
Name and address	AMERICAN BIRD CONSERVANCY PO BOX 249 THE PLAINS, VA 20198	00-0000000	10,000	
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Reg program supp			
Name and address	AUBURN UNIVERSITY FOUNDATION COLLEGE OF FORESTRY WILDLIFE & ENV 602 DUNACN DRIVE AUBURN, AL 36849	00-0000000	37,240	
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	State research			
Name and address	BENTON COUNTY CONSERVATION BOARD 5718 20TH AVE VINTON, IA 52313	00-0000000	7,500	
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Land Purchase			
Name and address	COLORADO STATE CHAPTER PUEBLO WEST CO 81007 PUEBLO WEST, CO 81007	00-0000000	7,268	

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

Name and address	CONGRESSIONAL SPORTMEN'S FOUNDATION WASHINGTON DC 20003 WASHINGTON, DC 20003	00-0000000	9,450
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

Name and address	CONSERVATION & NATURAL RESOURCE FOUNDATI 64 NORTH UNION STREET MONTGOMERY, AL 36130	00-0000000	13,711
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Turkey manage act

Name and address	DELAWARE DIVISION OF FISH & WILDLIFE 89 KINGS HIGHWAY DOVER, DE 19901	00-0000000	10,000
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Habitat equipment

Name and address	ECOFORRESTERS ASHEVILLE NC 288816 ASHEVILLE, NC 28816	00-0000000	11,981
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Contract Labor

Name and address	FLORIDA STATE CHAPTER 3676 S Brocksmith Rd Fort Pierce, FL 34945	00-0000000	6,560
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

Name and address	GA DNR LAW ENFORCEMENT 2070 HWY 278 SE SOCIAL CIRCLE, GA 30025	00-0000000	33,369
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Law enforce support

Name and address	GA DNRWRD 2067 HWY 278 SE SOCIAL CIRCLE, GA 30025	00-0000000	107,755
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Contract Labor

Name and address	GEORGIA WILDLIFE FEDERATION COVINGTON GA 30014 COVINGTON, GA 30014	00-0000000	12,500
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Other		
Name and address	ILLINOIS STATE CHAPTER PO Box 461 Odin, IL 62870	00-0000000	26,304
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Other		
Name and address	INDIANA NASP IHEA PO BOX 917 JASPER, IN 47547	00-0000000	10,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Archery in the Schools		
Name and address	INDIANA STATE CHAPTER 555 N 200 E Albion, IN 46701	00-0000000	12,446
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Other		
Name and address	INTERNATIONAL WILDLIFE CRIMESTOPPERS INC VASSALBORO ME 04989 VASSALBORO, ME 04989	00-0000000	30,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Law enforce support		
Name and address	MICHIGAN STATE CHAPTER 5854 E Exchange Rd Bancroft, MI 48414	00-0000000	7,752
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Other		
Name and address	MINNESOTA STATE CHAPTER 17789 HICKORY TRAIL LAKEVILLE, MN 55044	00-0000000	31,260
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	WS event state or local		
Name and address	MISSISSIPPI WILDLIFE FISHERIES & PARKS PO BOX 14194 JACKSON, MS 39236	00-0000000	25,000

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant 4H & other

Name and address	MISSOURI STATE CHAPTER 1213 Marcassin Dr Columbia, MO 65201	00-0000000	19,046
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

Name and address	NC WILDLIFE RESOURCES COMMISSION 1702 MAIL SERVICE CENTER RALEIGH, NC 27699	00-0000000	165,974
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Turkey manage act

Name and address	NEBRASKA STATE CHAPTER 41831 Road 752 Eustis, NE 69028	00-0000000	7,082
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

Name and address	NEW YORK STATE CHAPTER NWTF 3164 N NINE MILE RD ALLEGANY, NY 14706	00-0000000	10,169
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

Name and address	NORTH CAROLINA STATE CHAPTER 105 GLENCROFT RD HUBERT, NC 28539	00-0000000	25,000
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant ENDOWED PROFESSOR/PROGRAM

Name and address	NORTH CHEROKEE CHAPTER 128 SPICE HOLLOW ROAD JOHNSON CITY, TN 37604	00-0000000	6,000
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant JAKES Event State or Local

Name and address	NORTH LA WHEELIN SPORTSMEN LA Haughton LA 71037 Haughton, LA 71037	00-0000000	8,000
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant WS support materials

Schedule I, Part IV, Statement 1

NATIONAL WILD TURKEY FEDERATION INC

Name and address	OHEC 2955 KENNEDY RD HAZEL GREEN, WI 53811	00-0000000	6,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Outdoor Education Area		
Name and address	OHIO FFA CAMPS INC 3266 DYEWOOD ROAD CARROLLTON, OH 44615	00-0000000	6,156
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	4H/4H Shooting		
Name and address	OHIO STATE CHAPTER 608 WEST MAIN ST ANNA, OH 45302	00-0000000	17,667
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Other		
Name and address	OKLAHOMA DEPARTMENT OF WILDLIFE CONSERV PO BOX 53465 OKLAHOMA CITY, OK 73152	00-0000000	10,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Archery in the Schools		
Name and address	PENNSYLVANIA STATE CHAPTER 1953 Fairview School Rd Ellwood City, PA 16117	00-0000000	15,992
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Law enforce support & Other		
Name and address	PHEASANTS FOREVER INC ST PAUL MN 55110 ST PAUL, MN 55110	00-0000000	23,070
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Habitat equipment		
Name and address	SC HUNTERS FOR THE HUNGRY SPARTANBURG SC 29302 SPARTANBURG, SC 29302	00-0000000	25,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Other		
Name and address	SOUTH CAROLINA STATE CHAPTER 1300 Horseshoe Rd Iva, SC 29655	00-0000000	13,580

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

Name and address	SOUTH DAKOTA GAME FISH & PARKS 400 WEST KEMP AVE WATERTOWN, SD 57201	00-0000000	7,000
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Habitat equipment

Name and address	SOUTH DAKOTA SOIL HEALTH COALITION 43968 139TH ST WEBSTER, SD 57274	00-0000000	10,000
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Habitat equipment

Name and address	SOUTH DAKOTA STATE CHAPTER 1102 17th Ave S Brookings, SD 57006	00-0000000	10,244
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

Name and address	SOUTHEAST DAKOTA PRESCRIBED BURN ASSOC 282 OAK PARK ROAD YANKTON, SD 57078	00-0000000	6,000
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Habitat equipment

Name and address	STATE OF MICHIGAN 425 WEST OTTAWA LANSING, MI 48933	00-0000000	24,050
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Wildlife Openings/Brood Habitat

Name and address	STAUNTON MEHERRIN CHAPTER SKIPWITH VA 23968 SKIPWITH, VA 23968	00-0000000	19,500
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Wildlife Openings/Brood Habitat

Name and address	TENNESSEE TECH UNIVERSITY CAMPUS BOX 511 COOKEVILLE, TN 38505	00-0000000	10,000
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IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant State research

Name and address	TENNESSEE WILDLIFE RESOURCES AGENCY PO BOX 152 NEWBERN, TN 38059	00-0000000	53,273
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Wildlife Openings/Brood Habitat		
Name and address	TEXAS STATE CHAPTER SPICEWOOD TX 78669 Spicewood, TX 78669	00-0000000	10,681
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Other		
Name and address	TEXAS WILDLIFE ASSOCIATION FOUNDATION NEW BRAUNFELS TX 78132 NEW BRAUNFELS, TX 78132	00-0000000	10,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Learn to Hunt		
Name and address	THE LONGLEAF ALLIANCE 12130 DIXON CENTER ROAD ANDALUSIA, AL 36420	00-0000000	10,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Prescribed burns		
Name and address	THE NATURE CONSERVANCY 209 20TH STREET N 70 BIRMINGHAM, AL 35203	00-0000000	57,865
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Prescribed burns		
Name and address	THE NATURE CONSERVANCY AR LITTLE ROCK AR 72205 LITTLE ROCK, AR 72205	00-0000000	30,615
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Prescribed burns		
Name and address	THE NATURE CONSERVANCY GA 270 PEACHTREE STREET NW SUITE 1040 ATLANTA, GA 30303	00-0000000	13,546
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Habitat equipment		
Name and address	THE NATURE CONSERVANCY SC 1417 STUART ENGALS BLVD	00-0000000	15,000

SUITE 100
MT PLEASANT, SC 29464

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Prescribed burns

Name and address	THE TRUST FOR PUBLIC LAND	00-0000000	12,000
	JACKSON MS 39236		
	JACKSON, MS 39236		

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Land Purchase

Name and address	THREE FORKS WILD TURKEY IL	00-0000000	5,600
	1748 Murray Clark Rd		
	Danville, IL 61832		

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant WS event state or local

Name and address	TWIN RIVERS PBA	00-0000000	13,000
	300 STAR HOPE LANE		
	ELSBERRY, MO 63343		

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Habitat equipment

Name and address	UGA FOUNDATION	00-0000000	15,200
	180 EAST GREEN STREET		
	ATHENS, GA 30602		

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Research equip

Name and address	UNIVERSITY OF ALABAMA	00-0000000	30,000
	160 ROSE ADMINISTRATION BLDG		
	BOX 870135		
	TUSCALOOSA, AL 35487		

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant State research

Name and address	UNIVERSITY OF MISSOURICOLUMBIA AR	00-0000000	7,920
	PO BOX 807012		
	KANSAS CITY, MO 64180		

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant State research

Name and address	UPPER CUMBERLAND CHAPTER	00-0000000	10,000
	516 P BREWINGTON RD		
	COOKEVILLE, TN 38501		

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant	JAKES Event State or Local		
Name and address	USDA FOREST SERVICEOR PORTLAND OR 97228 PORTLAND, OR 97228	00-0000000	13,069

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant	Wildlife Openings/Brood Habitat		
Name and address	VIRGINIA STATE CHAPTER 817 POPLAR HILL ROAD NEWTOWN, VA 23126	00-0000000	34,271

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant	Cons Seed Program/Other		
Name and address	WASHINGTON STATE CHAPTER 642 C Ct Enumclaw, WA 98022	00-0000000	7,361

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant	Hunting Heritage Projects/Other		
Name and address	WEST VIRGINIA DIV OF NATURAL RESOURCES PO BOX 99 FARMINGTON, WV 26571	00-0000000	25,000

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant	Land Purchase		
Name and address	WI DEPARTMENT OF NATURAL RESOURCES PO BOX 78816 MILWAUKEE, WI 53278	00-0000000	19,120

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant	Wildlife Openings/Brood Habitat		
Name and address	WILDLIFE LEADERSHIP ACADEMY LOCK HAVEN PA 17745 LOCK HAVEN, PA 17745	00-0000000	10,000

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant	Educational Materials		
Name and address	WISCONSIN DNR PO BOX 78816 MILWAUKEE, WI 53278	00-0000000	5,390

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant	Wildlife Openings/Brood Habitat		
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Schedule I, Part IV, Statement 1

Name and address WISCONSIN STATE CHAPTER
PO Box 613
Weyauwega, WI 54983

NATIONAL WILD TURKEY FEDERATION INC

00-0000000

13,102

IRC code section

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant Other

**SCHEDULE J
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees**

**Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.**

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

NATIONAL WILD TURKEY FEDERATION INC

Employer identification number

57-0564993

Part I Questions Regarding Compensation

	Yes	No								
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <table><tr><td>☐ First-class or charter travel</td><td>☐ Housing allowance or residence for personal use</td></tr><tr><td>☐ Travel for companions</td><td>☐ Payments for business use of personal residence</td></tr><tr><td>☐ Tax indemnification and gross-up payments</td><td>☐ Health or social club dues or initiation fees</td></tr><tr><td>☐ Discretionary spending account</td><td>☐ Personal services (such as maid, chauffeur, chef)</td></tr></table>	☐ First-class or charter travel	☐ Housing allowance or residence for personal use	☐ Travel for companions	☐ Payments for business use of personal residence	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees	☐ Discretionary spending account	☐ Personal services (such as maid, chauffeur, chef)		
☐ First-class or charter travel	☐ Housing allowance or residence for personal use									
☐ Travel for companions	☐ Payments for business use of personal residence									
☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees									
☐ Discretionary spending account	☐ Personal services (such as maid, chauffeur, chef)									
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b									
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2									
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <table><tr><td>☒ Compensation committee</td><td>☒ Written employment contract</td></tr><tr><td>☐ Independent compensation consultant</td><td>☒ Compensation survey or study</td></tr><tr><td>☒ Form 990 of other organizations</td><td>☒ Approval by the board or compensation committee</td></tr></table>	☒ Compensation committee	☒ Written employment contract	☐ Independent compensation consultant	☒ Compensation survey or study	☒ Form 990 of other organizations	☒ Approval by the board or compensation committee				
☒ Compensation committee	☒ Written employment contract									
☐ Independent compensation consultant	☒ Compensation survey or study									
☒ Form 990 of other organizations	☒ Approval by the board or compensation committee									
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?	4a	✓								
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	✓								
c Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.	4c	✓								
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.										
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?	5a	✓								
b Any related organization? If "Yes" on line 5a or 5b, describe in Part III.	5b	✓								
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?	6a	✓								
b Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	6b	✓								
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	✓								
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	✓								
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9									

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	Jason Burckhalter, Co-CEO (Marketing/Fundraising)	(i) 280,409	128,250	454	10,101	21,731	440,945	0
	(ii)	0	0	0	0	0	0	0
2	Kurt Dyroff, Co-CEO (Conservation/Business Support)	(i) 280,632	128,250	454	10,101	21,508	440,945	0
	(ii)	0	0	0	0	0	0	0
3	Barry Woods, National Director Of Event Fundraising	(i) 166,280	7,805	582	6,967	24,127	205,761	0
	(ii)	0	0	0	0	0	0	0
4	Al Clark, National Director Of Development	(i) 147,338	15,236	12,324	6,607	22,098	203,603	0
	(ii)	0	0	0	0	0	0	0
5	Carol Frampton, Chief Legal Services	(i) 171,790	4,348	2,048	6,869	11,263	196,318	0
	(ii)	0	0	0	0	0	0	0
6	Chad Franklin, Director of Field Operations	(i) 133,511	10,444	441	5,618	22,630	172,644	0
	(ii)	0	0	0	0	0	0	0
7	Phillip Ferrare, Director of Field Operation Northeast	(i) 123,608	5,884	408	5,294	24,887	160,081	0
	(ii)	0	0	0	0	0	0	0
8	Greg Werner, SR Director Of Information Technology	(i) 143,532	3,597	1,344	5,615	3,391	157,479	0
	(ii)	0	0	0	0	0	0	0
9	Shawn McWilliams, National Director of Product & Project Leadership	(i) 124,524	3,153	257	4,930	17,462	150,326	0
	(ii)	0	0	0	0	0	0	0
10								
11								
	(ii)							
12								
	(ii)							
13								
	(ii)							
14								
	(ii)							
15								
	(ii)							
16								
	(ii)							

Part III

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

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

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization

NATIONAL WILD TURKEY FEDERATION INC

Employer identification number

57-0564993

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (CONVENTION DONATIONS)	✓	128	153,134	FMV AT DATE OF RECEIPT
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement

29	
----	--

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		✓

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31		✓
----	--	---

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a		✓
-----	--	---

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

--	--	--

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M, Part I, Line 33 - THE ORGANIZATION ESTIMATES THE NUMBER OF CONTRIBUTION ITEMS RECEIVED FOR CONVENTION DONATIONS.

Name of the organization	Employer identification number
NATIONAL WILD TURKEY FEDERATION INC	57-0564993

Form 990, Part VI, Section A, Line 6 - AS OF AUGUST 31, 2025, THE NWTf HAD 258,488 MEMBERS

Form 990, Part VI, Section A, Line 7a - MEMBERS RECEIVE ONE OFFICIAL BALLOT IN THE LAST ISSUE WITHIN EACH CALENDAR YEAR OF TURKEY CALL MAGAZINE WHICH LISTS THE NAMES OF SIX CANDIDATES, ALONG WITH THEIR PICTURES AND RESUMES. EACH MEMBER VOTES FOR THREE OF THE SIX CANDIDATES. THE MEMBER MAELS THE POSTAGE PAID BALLOT TO A CPA FIRM WHERE AN AUDITOR TABULATES THE VOTES.

Form 990, Part VI, Section B, Line 11b - ONCE THE 990 FORM IS PREPARED, IT IS REVIEWED AND APPROVED BY THE DIRECTOR OF GENERAL ACCOUNTING, CHIEF OF LEGAL SERVICES, CO-CEO (CONSERVATION/BUSINESS SUPPORT), AND SENT TO THE BOARD OF DIRECTORS PRIOR TO SUBMITTAL.

Form 990, Part VI, Section B, Line 12c - IT IS THE POLICY OF NWTf THAT NO DIRECTOR, OFFICER OR EMPLOYEE SHALL TAKE ANY ACTION, ENGAGE IN ANY ACTIVITY OR PLACE HERSELF OR HIMSELF IN A POSITION WHICH REASONABLY COULD BE CONSTRUED TO BE IN CONFLICT WITH THE BEST INTERESTS OF THE NWTf. EVERY DIRECTOR, OFFICER AND EMPLOYEE HAS A DUTY TO AVOID BUSINESS, FINANCIAL OR OTHER DIRECT OR INDIRECT INTERESTS OR RELATIONSHIPS WHICH CONFLICT WITH THE INTERESTS OF THE NWTf, WHICH DIVIDE ONE'S LOYALTY TO THE NWTf, OR WHICH DETRACT FROM PROVIDING FULL ATTENTION TO ONE'S EMPLOYMENT RESPONSIBILITIES. ANY ACTIVITIES WHICH EVEN APPEAR TO PRESENT SUCH A CONFLICT, SUCH AS RECEIPTS OF GIFTS FROM VENDORS, WORK WITH ORGANIZATIONS IN COMPETITION WITH THE NWTf, OR ACCEPTANCE OF MUTUAL EMPLOYMENT WITHANY VENDOR, MEMBER-OWNED OR -OPERATED ORGANIZATION, OR COMPETING ORGANIZATION MUST BE AVOIDED OR TERMINATED UNLESS, AFTER DISCLOSURE TO THE APPROPRIATE LEVEL OF MANAGEMENT (WHICH IS THE EMPLOYEE'S DIRECT SUPERVISOR - OR IF THE SUPERVISOR IS NOT AVAILABLE OR IF THE SUPERVISOR IS PRESENT WITHIN THE CONFLICT - THE HUMAN RESOURCES DIRECTOR), IT IS DETERMINED THAT THE ACTIVITY IS NOT HARMFUL TO THE NWTf OR OTHERWISE IMPROPER. EMPLOYEES FAILING TO REPORT SUCH CONFLICTS MAY BE SUBJECT TO IMMEDIATE TERMINATION.

Form 990, Part VI, Section B, Line 15 - THE EXECUTIVE COMMITTEE SHALL COLLECTIVELY BE RESPONSIBLE FOR THE EVALUATION OF THE PERFORMANCE AND COMPENSATION, AND FOR REVIEWING THE ASSIGNED POWERS AND DUTIES, OF THE OFFICE OF THE CHIEF EXECUTIVE OFFICER. THE CHIEF EXECUTIVE OFFICER OF THE NWTf SHALL HAVE RESPONSIBILITY FOR AND CONTROL OF ALL THE NWTf EMPLOYEES. THE CHIEF EXECUTIVE OFFICER SHALL HAVE THE RESPONSIBILITY FOR THE HIRING AND THE FIRING OF NWTf EMPLOYEES.

Form 990, Part VI, Section C, Line 19 - GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE UPON REQUEST. THE NWTf'S FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC THROUGH ITS WEBSITE WWW.NWTf.ORG.

Form 990, Part IX, Line 24e - MISCELLANEOUS EVENT AND GRANT EXPENSES

States Where Copy Of Return Is Filed
States
AK
AL
AR
CA
CO
CT
FL
GA
HI
IL
KS
KY
LA
MA
MD
MI
MN
MS
NC
ND
NH
NJ
NM
NV
NY
OH
OK
OR
PA
RI
SC
TN
VA
WI
WV

SCHEDULE R
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

NATIONAL WILD TURKEY FEDERATION INC

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public
Inspection

Employer identification number
57-0564993

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) American Upland Land Trust LLC (30-0893571) PO Box 530, EDGEFIELD, SC 29824	LAND MGT	SC	0	50,000	NWTF
(2) Palmetto Shooting Complex LLC (88-3223980) 535 Gary Hill Road, EDGEFIELD, SC 29824	FIREARM EDUCATION AND TRAINING	SC	872,457	6,581,248	NWTF
(3) Healthy Habitat Land Trust LLC (88-1750879) PO Box 530, EDGEFIELD, SC 29824	CONSERVATION EASEMENTS	SC	0	0	NWTF
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) National Wild Turkey Federation Endowment Foundation (57-0743) PO BOX 530, EDGEFIELD, SC 29824	DONOR DESIGNATED	SC	501	9	N/A		✓
(2) NWTF Foundation (80-0725904) PO BOX 530, EDGEFIELD, SC 29824	CONSERVATION	SC	501	9	N/A		✓
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) (Rev. 12-2024)

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V–UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)-----												
(2)-----												
(3)-----												
(4)-----												
(5)-----												
(6)-----												
(7)-----												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)-----									
(2)-----									
(3)-----									
(4)-----									
(5)-----									
(6)-----									
(7)-----									

Part V **Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?

			Yes	No
a	Receipt of (i) interest, (iii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		✓
b	Gift, grant, or capital contribution to related organization(s)	1b		✓
c	Gift, grant, or capital contribution from related organization(s)	1c		✓
d	Loans or loan guarantees to or for related organization(s)	1d		✓
e	Loans or loan guarantees by related organization(s)	1e		✓
f	Dividends from related organization(s)	1f		✓
g	Sale of assets to related organization(s)	1g		✓
h	Purchase of assets from related organization(s)	1h		✓
i	Exchange of assets with related organization(s)	1i		✓
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		✓
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		✓
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	✓	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		✓
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	✓	
o	Sharing of paid employees with related organization(s)	1o	✓	
p	Reimbursement paid to related organization(s) for expenses	1p		✓
q	Reimbursement paid by related organization(s) for expenses	1q		✓
r	Other transfer of cash or property to related organization(s)	1r		✓
s	Other transfer of cash or property from related organization(s)	1s		✓
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

	(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered “Yes” on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V–UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1).....													
(2).....													
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(16).....													

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

[illegible]

Form 8453-TE Department of the Treasury Internal Revenue Service	Tax Exempt Entity Declaration and Signature for E-file For calendar year 2024, or tax year beginning <u>09/01/2024</u> and ending <u>08/31/2025</u> For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP Go to www.irs.gov/Form8453TE for the latest information.	OMB No. 1545-0047 2024
Name of filer NATIONAL WILD TURKEY FEDERATION INC		EIN or SSN 57-0564993

Part I Type of Return and Return Information			
Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.			
1a Form 990 check here	☒	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 54,333,787
2a Form 990-EZ check here	☐	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here	☐	b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here	☐	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b
5a Form 8868 check here	☐	b Balance due (Form 8868, line 3c)	5b
6a Form 990-T check here	☐	b Total tax (Form 990-T, Part III, line 4)	6b
7a Form 4720 check here	☐	b Total tax (Form 4720, Part III, line 1)	7b
8a Form 5227 check here	☐	b FMV of assets at end of tax year (Form 5227, Item D)	8b
9a Form 5330 check here	☐	b Tax due (Form 5330, Part II, line 19)	9b
10a Form 8038-CP check here	☐	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b

Part II Declaration of Officer or Person Subject to Tax
11a ☐ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
b ☐ If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that ☒ I am an officer of the above named entity or ☐ I am the person subject to tax with respect to (name of entity) _____, (EIN) _____, and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign <u>KURT W DYROFF</u> Here Signature of officer or person subject to tax	July 15, 2026 Date	KURT W DYROFF, Co-CEO Title, if applicable
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Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)				
I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.				
ERO's Use Only	ERO's signature	Date	Check if also paid preparer ☐	Check if self-employed ☐
	Firm's name (or yours if self-employed), address, and ZIP code			
	ERO's SSN or PTIN EIN Phone no.			

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ☐	PTIN
	Firm's name				Firm's EIN
	Firm's address				Phone no.