# Tax Return

Western Association of Fish and Wildlife Agencies Year Ended June 30, 2024



Helping you succeed, financially and beyond.

#### Form **8868**

(Rev. January 2024)

#### Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electr	onic filing (e-file). You can electronically file Form 8868 to	request up	to a 6-month extension of time to	file any of	the forms		
listed b	pelow except for Form 8870, Information Return for Transfe	rs Associa	ted With Certain Personal Benefit C	Contracts.	An extension		
request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form							
8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.							
Cautio	Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment						
instruc	tions.						
All cor	All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts						
<u>must ι</u>	se Form 7004 to request an extension of time to file income	e tax returi	าร.				
Part I	Identification			_			
Туре				Taxpaye	r identification i	number (TIN)	
Print	WESTERN ASSOCIATION OF FISH	I AND	WILDLIFE				
File by th	AGENCIES				82-032	9350	
due date	for Number, street, and room or suite no. If a P.O. box, so	ee instruct	ions.				
filing you return. S							
instructio		reign addr	ess, see instructions.				
	BOISE, ID 83719						
Enter t	he Return Code for the return that this application is for (file	e a separat	e application for each return)			01	
Applic	ation Is For	Return	Application Is For			Return	
		Code				Code	
Form 9	90 or Form 990-EZ	01	Form 4720 (other than individual)			09	
Form 4	720 (individual)	03	Form 5227			10	
Form 9	90-PF	04	Form 6069			11	
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12			
Form 9	90-T (trust other than above)	06	Form 5330 (individual)			13	
Form 9	90-T (corporation)	07	Form 5330 (other than individual)			14	
Form 1	041-A	08					
<ul><li>After</li></ul>	you enter your Return Code, complete either Part II or Part	t III. Part III	, including signature, is applicable	only for an	extension of		
time to	file Form 5330.						
<ul><li>If thi</li></ul>	s application is for an extension of time to file Form 5330, y	ou must ei	nter the following information.				
ı	Plan Name						
ı	Plan Number						
	Plan Year Ending (MM/DD/YYYY)						
	Automatic Extension of Time To File for Exempt Organi	izations (s	ee instructions)				
The	books are in the care of THE ORGANIZATION						
	PO BOX 190150 - E	BOISE,	ID 83719				
	ephone No. <u>(765) 404-4986</u>		Fax No.				
	e organization does not have an office or place of business						
• If th	is is for a Group Return, enter the organization's four-digit (	Group Exe	mption Number (GEN)	If this is fo	r the whole gro	oup, check this	
box	If it is for part of the group, check this box	and atta	ch a list with the names and TINs o	f all memb	ers the extensi	on is for.	
1	request an automatic 6-month extension of time until	AY 15		le the exen	npt organizatio	n return for	
1	he organization named above. The extension is for the orga	anization's	return for:				
[	calendar year 20 or						
	X tax year beginning JUL 1 , 20 23 , and ending JUN 30 . , 20 24						
2	f the tax year entered in line 1 is for less than 12 months, cl	heck reasc	n: Initial return	Final retur	n		
[	Change in accounting period						
3a	f this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter the	tentative tax, less				
3	any nonrefundable credits. See instructions.			3a	\$	0.	
b i	f this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and				
				1	1 🔺	^	
9	estimated tax payments made. Include any prior year overp	ayment all	owed as a credit.	3b	\$	0.	
-	estimated tax payments made. Include any prior year overp Balance due. Subtract line 3b from line 3a. Include your pa			3b	\$	0.	

# Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

ΑF	or the	2023 calendar year, or tax year beginning JUL 1, 2023 and ending	JUN 30, 2024			
<u>—</u>	heck if	C Name of organization	D Employer identific	cation number		
а	pplicable	WESTERN ASSOCIATION OF FISH AND WILDLIFE				
	Addres	S AGENCIES				
	Name change		82-03293	50		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/si	uite <b>E</b> Telephone number			
	Final return/	PO BOX 190150	(765) 40			
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	4,701,732.		
	Ameno		H(a) Is this a group re	turn		
	Application	F Name and address of principal officer: ZACH LOWE	for subordinates	? Yes X No		
	pendin	g SAME AS C ABOVE	H(b) Are all subordinates in	cluded? Yes No		
<u> 1 T</u>	ax-exe	empt status: 501(c)(3) X 501(c) ( 4 ) (insert no.) 4947(a)(1) or	527 If "No," attach a	list. See instructions		
	Vebsit		H(c) Group exemption	n number		
<b>K</b> F	orm of	organization: X Corporation Trust Association Other L Y	ear of formation: 1922 N	1 State of legal domicile: ID		
Pa	art I	Summary				
•	1	Briefly describe the organization's mission or most significant activities: PROMOTING	G THE PRESERVA	ATION OF		
Governance	;	NATURAL RESOURCES TO SUSTAIN FISH AND WILDLIF	E IN WESTERN	STATES.		
rna	2	Check this box if the organization discontinued its operations or disposed of m	ore than 25% of its net ass	ets.		
ove	3	Number of voting members of the governing body (Part VI, line 1a)	3	23		
	4	Number of independent voting members of the governing body (Part VI, line 1b)		23		
Se Se	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	18		
<u>vit</u> i	6	Total number of volunteers (estimate if necessary)	6	23		
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.		
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.		
			Prior Year	Current Year		
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	2,235,053.	3,448,831.		
Revenue	9	Program service revenue (Part VIII, line 2g)	1,223,858.	1,239,846.		
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,870.	13,055.		
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,460,781.	4,701,732.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.		
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,422,756.	1,596,074.		
penses	l	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.		
Expe	l	Total fundraising expenses (Part IX, column (D), line 25)	1 504 500	0 240 000		
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,784,522.	2,340,298.		
	l	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,207,278.	3,936,372.		
		Revenue less expenses. Subtract line 18 from line 12	253,503.	765,360.		
Net Assets or Fund Balances			Beginning of Current Year	End of Year		
sset 3ala	20	Total assets (Part X, line 16)	1,695,315.	2,552,733.		
et A	21	Total liabilities (Part X, line 26)	531,383.	623,441.		
Z <sub>□</sub>	rt II	Net assets or fund balances. Subtract line 21 from line 20	1,103,932.	1,343,434.		
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and state	amonte, and to the heet of my	knowledge and helief it is		
		tides of perjury, rideciare that triave examined this return, including accompanying schedules and star t, and complete. Declaration of preparer (other than officer) is based on all informati <mark>on of w</mark> hich preparer		knowledge and belief, it is		
uuc,	COLLEC	t, and complete. Decial ation of preparer (other than officer) is based on all information of which were	TO THE STATE OF TH			
Sigr		Signature of officer	/\\\			
Sigi Her		ZACH LOWE, EXECUTIVE DIRECTOR				
Hei	•	Type or print name and title	$\sqrt{2}$	7		
		Print/Type preparer's name Preparer's signature	Dale Check	PTIN		
Paid		CHERYL GUIDDY  CHERYL GUIDDY	02/13/25 if self-employ			
	arer	Firm's name HARRIS & CO., PLLC		6-4022510		
Use Only Firm's address 1120 S. RACKHAM WAY, STE 100						
	,	MERIDIAN, ID 83642	Phone no. (2	08) 333-8965		
Mav	the IF	S discuss this return with the preparer shown above? See instructions	1	X Yes No		
,		, part to the state of the stat		000		

Form	990 (2023) AGENCIES 82-0329350 Page	e <b>2</b>
Pai	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	THE WESTERN ASSOCIATION OF FISH AND WILDLIFE AGENCIES PROMOTES THE	
	PRESERVATION OF RESOURCES IN ORDER TO SUSTAIN FISH AND WILDLIFE IN THE	
	WESTERN STATES.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_		Na
	prior Form 990 or 990-EZ?  If "Yes." describe these new services on Schedule O.	NO
_		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	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 \$ 2,774,816. including grants of \$) (Revenue \$ 428,200	<u>•</u> )
	GRANT MANAGEMENT	
	WAFWA'S INITIATIVE FOCUS ON ADVANCING SCIENCE AND POLICY, WHILE	
	PROVIDING BEST MANAGEMENT PRACTICES AND WRITTEN STANDARDS FOR TECHNICAL	
	GUIDANCE. INITIATIVES OF HIGHEST PRIORITY ARE SELECTED BY OUR MEMBER	
	AGENCIES. WAFWA HAS 5 FOCAL INITIATIVES: SAGEBRUSH CONSERVATION	
	INITIATIVE, WESTERN GRASSLANDS INITIATIVE, WESTERN NATIVE TROUT	
	INITIATIVE, WILD SHEEP INITIATIVE, AND WILDLIFE MOVEMENT AND	
	CONNECTIVITY INITIATIVE.	
41.	(Code:) (Expenses \$ 712,105. including grants of \$) (Revenue \$ 811,646	
4b	(Code:) (Expenses \$	<u>•</u> )
	CONFERENCED & WORRDHOLD	
	THE WESTERN ASSOCIATION OF FISH AND WILDLIFE AGENCIES HOSTS TWO ANNUAL	
	CONFERENCES: THE ANNUAL SUMMER MEETING AND THE EXECUTIVE LEADERSHIP	
	MEETING WHERE WAFWA SUPPORTS INFORMATION EXCHANGE TO HELP FACILITATE	
	EFFECTIVE PARTNERSHIPS AND CAPABILITIES OF MEMBERS AND THE BROADER	
	COMMUNITY TO ADDRESS IMPORTANT EMERGING ISSUES ACROSS THE WEST. THE	
	ANNUAL SUMMER MEETING CONNECTS MEMBER AGENCY LEADERS AND TECHNICAL	
	STAFF WITH ONE ANOTHER, FEDERAL AGENCIES, NONPROFIT ORGANIZATIONS, AND	
	PARTNERS. MANY OF OUR 24 COMMITTEES (INCLUDING THE NONGAME AND	
	ENDANGERED FISH & WILDLIFE COMMITTEE AND THE WILDLIFE HEALTH COMMITTEE)	
	AND TAKE THE OPPORTUNITY TO MEET DURING THE ANNUAL SUMMER MEETING. THE	
4c	(Code:) (Expenses \$	)
4d	Other program services (Describe on Schedule O.)	
40		
4.	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses 3,486,921.	
40	Total program service expenses 3,486,921.	

## Form 990 (2023) AGENCIES 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)?		100	
•	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		Х
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	X	
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		X
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		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
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		<u> </u>
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		X
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			37
	Part VI	11a		<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		Х
لم	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
u	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	11d	Х	
۵	Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
·	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
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		<u>X</u>
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		<u>X</u>
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		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	1		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		Х
20-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		<u> </u>
- '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
	James Transfer of the state of			

Form 990 (2023) AGENCIES
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		X
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	X	—
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		├──
С	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		-
	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			3,7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			177
	Schedule L, Part I	25b		X
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%			v
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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			x
00	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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	000		X
L	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	,	28c		x
29	"Yes," complete Schedule L, Part IV	29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30		30		x
31	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-51		<u> </u>
<b>J</b> Z	Schedule N. Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
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	х	1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	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	Х	
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		Х
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	Х	
Par				
	Check 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			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	<u> </u>

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Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 18 filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2h X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 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? Х 6a 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). Х 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a 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 If "Yes," enter the amount of tax-exempt interest received or accrued during the year ...... 12b Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 excess parachute payment(s) during the year? Х 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. 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? 17 If "Yes," complete Form 6069.

Form 990 (2023)

AGENCIES

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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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 1b 23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
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?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
h	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00		
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	This Section B requests information about policies not required by the internal nevenue code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	iou		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
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	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
_	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	.55		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
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)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.	,,		
	X Own website Another's website X 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	financ	cial	
	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			
	THE ORGANIZATION - (765) 404-4986			
	PO BOX 190150, BOISE, ID 83719			

#### AGENCIES

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

Form 990 (2023)

Check if Schedule O contains a response or note to any line in this Part VII

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#### 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.

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

- 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 ne		orga I	nıza			npen	sate			
(A)	(B)	(C) Position						(D)	(E)	(F)
Name and title	Average	(do not check mor				than c		Reportable	Reportable	Estimated
	hours per week	box, unless person is both an officer and a director/trustee)						compensation from	compensation from related	amount of other
	(list any	rot						the	organizations	compensation
	hours for	Individual trustee or director				p		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	Institutional trustee		oyee	Highest compensated employee		1099-NEC)	,	and related
	below	idual	tution	er	Key employee	est co loyee	ıer			organizations
	line)	Indiv	Instit	Officer	Key (	High emp	Former			
(1) DR. ZACHARY LOWE	34.00									
EXECUTIVE DIRECTOR	6.00			Х				153,860.	0.	7,693.
(2) TIM MCCOY	4.00								_	_
PRESIDENT	2.00	Х		Х				0.	0.	0.
(3) J SHIRLEY	4.00								_	_
VICE PRESIDENT	2.00	Х		Х				0.	0.	0.
(4) TY GRAY	4.00									
EXECUTIVE COMMITTEE MEMBER AT LARGE	2.00	Х						0.	0.	0.
(5) JEFF DAVIS	4.00	l								•
EXECUTIVE COMMITTEE MEMBER AT LARGE	2.00	Х						0.	0.	0.
(6) KEVIN ROBLING	4.00								•	•
EXECUTIVE COMMITTEE MEMBER AT LARGE	2.00	Х						0.	0.	0.
(7) BRIAN NESVIK	2.00	7.7							0	0
(8) DOUG VINCENT-LANG	1.00	Х						0.	0.	0.
BOARD MEMBER	2.00	х						0.	0.	0.
(9) SUE COTTERILL	1.00	Λ						0.	0.	<u></u>
BOARD MEMBER	2.00	Х						0.	0.	0.
(10) RICHARD ELLIOTT	1.00	Λ						0.	0.	<u></u>
BOARD MEMBER	2.00	Х						0.	0.	0.
(11) CHUCK BONHAM	1.00	25						•	<b>.</b>	
BOARD MEMBER	2.00	х						0.	0.	0.
(12) JIM FREDERICKS	1.00									
BOARD MEMBER	2.00	Х						0.	0.	0.
(13) CHRIS KENNEDY	1.00									
BOARD MEMBER	2.00	Х						0.	0.	0.
(14) DUSTIN TEMPLE	1.00									
BOARD MEMBER	2.00	Х						0.	0.	0.
(15) JEB WILLIAMS	1.00									
BOARD MEMBER	2.00	Х						0.	0.	0.
(16) MICHAEL SLOANE	1.00									_
BOARD MEMBER	2.00	Х						0.	0.	0.
(17) HEATHER SAYINE-CRAWFORD	1.00									_
BOARD MEMBER	2.00	X						0.	0.	<b>0.</b>

Form **990** (2023)

Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	anc	High R	ghe	st C	compensated Employee	s (continued)				
(A)	(B)				C)	_		(D)	(E)			(F)	
Name and title	Average		not c	Pos heck	more	than		Reportable Reportable			Estimated		
	hours per week			ss per nd a di				compensation compensati			amount of other		ot
	(list any	tor						the	organization		com	ipensa	tion
	hours for	r direc				pe		organization	(W-2/1099-MIS		ı	om th	
	related	stee o	rustee			ensat		(W-2/1099-MISC/	1099-NEC)	)	ı `	anizat	
	organizations below	ial trus	onal t		oloyee	l comp		1099-NEC)			l	d relat	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				org	anizati	ons
(18) ALAN JENNE	1.00	Ī	Ī		<u>×</u>	1 0	<u> </u>						
BOARD MEMBER	2.00	Х						0.		0.			0.
(19) WADE FREE	1.00												
BOARD MEMBER	2.00	Х				_		0.		0.			0.
(20) DEBBIE COLBERT	1.00									•			•
BOARD MEMBER	2.00	Х				-	_	0.		0.			0.
(21) AMY CARRIERE	1.00	<b>.</b>						0.		0.			0
BOARD MEMBER (22) DAVID YOSKOWITZ	1.00	Х				$\vdash$	_	0.		0.			0.
BOARD MEMBER	2.00	Х						0.		0.			0.
(23) KELLY SUSEWIND	1.00	25								<u> </u>			<u> </u>
BOARD MEMBER	2.00	х						0.		0.			0.
(24) MARC CATTET	1.00												
BOARD MEMBER	2.00	Х				_		0.		0. 0.		0.	
								152.060				- C	^ ^
1b Subtotal								153,860.		0. 7,693.			
c Total from continuation sheets to Part VI								153,860.		0. 0. 7,693.			
d Total (add lines 1b and 1c)									L 000 of reportable			<i>1</i> ,0.	<i>.</i>
compensation from the organization	ot miniod to th	000	11010	o un	, ove	, ···		socived more than \$100,	ooo or reportable	O			1
*												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	кеу е	empl	loye	e, oı	hiç	ghest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for se	uch individual										3		X
4 For any individual listed on line 1a, is the su	•							·	•			7.7	
and related organizations greater than \$150			•								4	Х	
5 Did any person listed on line 1a receive or a										_		Х	
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e J f	or si	ıch <u>i</u>	oers	on					5		Λ
Complete this table for your five highest contains the second secon	mpensated inc	lene	nde	nt co	ontra	acto	rs tl	hat received more than \$	3100.000 of com	nensa	tion fr	om	
the organization. Report compensation for t										p 01.10 ca			
(A)								(B)			((	C)	
Name and business								Description of s	ervices	С	ompe	nsatio	n
FISHERIES MANAGEMENT SOLU													
4777 N HACIENDA AVE, BOIS		<u>37</u>	03					FISHERIES MA	NAGEMENT	NT 180,026.			
OUTHWICK ASSOCIATES, INC.		2.0	^ ^	_			SURVEY DATA			1 0	0 0	00	
PO BOX 6435, FERNANDINA BEACH, F			<u>34</u>	03	<u> </u>			COLLECTION/D	RAFT SUR		10	0,8	00.
2 Total number of independent contractors (in		ot lir	nited	o to	_	se lis <b>)</b>	ted	above) who received mo	ore than				

Form 990 (2023) AGENCIE
Part VIII Statement of Revenue

		Check if Schedule O	contains a	response	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
							iunction revenue	business revenue	sections 512 - 514
Siα	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b			1b					
ဗ် ဗို		Fundraising events		1c					
ffs,		Related organizations		1d					
ية إق		Government grants (contri			443,666.				
Sir			-		<del>11</del> 3,000.				
utio	T	All other contributions, gifts,		1 1	5,165.				
έş		similar amounts not included		1f	3,103.				
on	9		lines 1a-1f	1g  \$		2 440 021			
Og	h	Total. Add lines 1a-1f				3,448,831.			
		COMPEDENCES			Business Code	601 575	CO1 F7F		
Se	2 a	CONFERENCES	_~		110000	601,575.	601,575.		
Program Service Revenue	b	MEMBERSHIP DU	ES AN	D AS	110000	428,200.	428,200.		
S	С	WORKSHOPS			110000	210,071.	210,071.		
ar eve	d								
og B	е								
Ā	f	All other program service i	revenue .						
	g	Total. Add lines 2a-2f				1,239,846.			
	3	Investment income (includ	ling divide	ends, intere	st, and				
		other similar amounts)				13,055.			13,055.
	4	Income from investment o							
	5	Royalties							
		,		(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	h	Less: rental expenses	6b						
	~	Rental income or (loss)	6c						
	٦	Net rental income or (loss)							
		Gross amount from sales of		Securities	(ii) Other				
	1 a		<del>  ``</del>	occurrico .	(ii) Other				
		assets other than inventory	7a						
•	D	Less: cost or other basis	l						
ther Revenue		and sales expenses	7b						
e e		Gain or (loss)	7c						
ı,		Net gain or (loss)			T				
je i	8 a	Gross income from fundraisir	ng events (	not					
Ö		including \$		_ of					
		contributions reported on							
		Part IV, line 18							
	b	Less: direct expenses		8b					
		Net income or (loss) from							
	9 a	Gross income from gamin							
		Part IV, line 19		9a					
	b	Less: direct expenses		9b					
	С	Net income or (loss) from	gaming a	ctivities					
	10 a	Gross sales of inventory, le	ess returr	ıs					
		and allowances10a							
	b	Less: cost of goods sold							
		: Net income or (loss) from							
		, , ,		<del>,</del>	Business Code				
Snc	11 a	r							
ne The	b								
Miscellaneous Revenue	c								
ŠČ		All other revenue							
Σ		Total. Add lines 11a-11d							
	12	Total revenue. See instruction				4,701,732.	1,239,846.	0.	13,055.

Form 990 (2023) 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 (**D**) Fundraising expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 157,639. 185,458. 27,819. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 986,547. 1,160,644. 174,097. Other salaries and wages 7 Pension plan accruals and contributions (include 55,400. 47,090. 8,310. section 401(k) and 403(b) employer contributions) 70,984. 60,336. 10,648.Other employee benefits 9 123,588. 105,050. 18,538. 10 Payroll taxes Fees for services (nonemployees): Management 6,540. 6,540. Legal 84,856. 84,856. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 603,238. 603,238. column (A), amount, list line 11g expenses on Sch O.) 2,200. 2,200. Advertising and promotion 12 539,570. 488,119. 51,451. Office expenses 13 160,381. 120,286. 40,095. Information technology 14 15 Royalties 6,781. 6,781. 16 Occupancy 246,895. 246,895. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 416,102. 416,102. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization ..... 22 20,316. 20,316. 23 Other expenses. Itemize expenses not covered 24 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.) 253,419. 253,419. GRANT EXPENDITURES All other expenses 3,936,372. 3,486,921. 449,451. 0. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined

Check here

educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

Form 990 (2023)
Part X Balance Sheet

<u>Part</u>	X	Balance Sheet				
		Check if Schedule O contains a response or r	note to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		119,298.	1	779,067
	2	Savings and temporary cash investments		1,239,474.	2	672,519
	3	Pledges and grants receivable, net		129,549.	3	510,393
	4	Accounts receivable, net		55,440.	4	226,341
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, sub				
		controlled entity or family member of any of the	nese persons		5	
	6	Loans and other receivables from other disqu	alified persons (as defined			
		under section 4958(f)(1)), and persons describ	ped in section 4958(c)(3)(B)		6	
2	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
ž	9			70,579.	9	140,498
	10a	Land, buildings, and equipment: cost or other	.			
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line			12	
	13	Investments - program-related. See Part IV, lin	e 11		13	
.	14	Intangible assets			14	
.	15	Other assets. See Part IV, line 11		80,975.	15	223,915
_   .	16	Total assets. Add lines 1 through 15 (must ed		1,695,315.	16	2,552,733
	17	Accounts payable and accrued expenses		225,112.	17	505,073
.	18	Grants payable	226 245	18	25.060	
.	19	Deferred revenue		226,315.	19	97,260
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complet			21	
se 2	22	Loans and other payables to any current or fo				
Liabilities		trustee, key employee, creator or founder, sub				
<u>ia</u>		controlled entity or family member of any of the			22	
_   1	23	Secured mortgages and notes payable to unr			23	
	24	Unsecured notes and loans payable to unrela			24	
2	25	Other liabilities (including federal income tax,	• •			
		parties, and other liabilities not included on lin	, · · ·	70 056		01 100
				79,956.		21,108
$+^2$	26	Total liabilities. Add lines 17 through 25		531,383.	26	623,441
ပ္ပ		Organizations that follow FASB ASC 958, c	neck nere 🔼			
ည္ရ   <u>၂</u>	~~	and complete lines 27, 28, 32, and 33.		1,144,882.	07	1,364,031
<u>a</u> a a	27 22	Net assets without donor restrictions		19,050.	27	565,261
2 2	28	Net assets with donor restrictions		19,030.	28	303,201
<u> </u>		Organizations that do not follow FASB ASC	958, check here			
<u>.</u>	~~	and complete lines 29 through 33.	.1-		00	
SI   3	29 20	Capital stock or trust principal, or current fund			29	
SSI	30	Paid-in or capital surplus, or land, building, or			30	
ا ب	31	Retained earnings, endowment, accumulated		1,163,932.	31	1,929,292
_	32	Total net assets or fund balances		1,695,315.	32	
:	33	Total liabilities and net assets/fund balances		1,033,313.	33	2,552,733 Form <b>990</b> (202

### WESTERN ASSOCIATION OF FISH AND WILDLIFE

Form 990 (2023) AGENCIES 82-0329350 Page 12

Pa	rt XI Reconciliation of Net Assets				
	Check 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	4,70		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,93	6,3	<u>72.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		5,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,16	3,9	<u>32.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
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	1,92	9,2	92.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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?		2b	X	
	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 X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	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?		. 3a	X	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	<u> </u>

Form **990** (2023)

#### Schedule B

(Form 990)

#### **Schedule of Contributors**

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

**AGENCIES** 

**Employer identification number** 

82-0329350 Organization type (check one):

WESTERN ASSOCIATION OF FISH AND WILDLIFE

Filers of:	Section:
Form 990 or 990-EZ	$oxed{X}$ 501(c)( $oxed{4}$ ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Check if your organization	tion is covered by the <b>General Rule</b> or a <b>Special Rule</b> .
	01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
-	zation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or nany one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509( contributor, d	zation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under (a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; 90-EZ, line 1. Complete Parts I and II.
contributor, d literary, or edu	zation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, ucational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering mn (b) instead of the contributor name and address), II, and III.
year, contribu is checked, e purpose. Don	zation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the utions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box on the the total contributions that were received during the year for an exclusively religious, charitable, etc., or the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively ritable, etc., contributions totaling \$5,000 or more during the year \$
· ·	ion that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> <i>J</i> , line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify
that it doesn't meet the	e filing requirements of Schedule B (Form 990)

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Name of organization
WESTERN ASSOCIATION OF FISH AND WILDLIFE
AGENCIES

Employer identification number
82-0329350

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization
WESTERN ASSOCIATION OF FISH AND WILDLIFE
AGENCIES

Employer identification number
82-0329350

Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_ _ _ _ _ \$	

**Employer identification number** Name of organization WESTERN ASSOCIATION OF FISH AND WILDLIFE AGENCIES 82-0329350 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### SCHEDULE C

(Form 990)

Part I-A

**Political Campaign and Lobbying Activities** 

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

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures

Complete if the organization is exempt under section 501(c)(3).

Section 527 organizations: Complete Part I-A only.

Volunteer hours for political campaign activities

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:

 Fax) (see separate instructions), then:

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

 Name of organization
 WESTERN ASSOCIATION OF FISH AND WILDLIFE AGENCIES
 Employer identification number 82-0329350

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

1	Enter the amount of any excise tax	incurred by the organization under	section 4955	\$	
2	Enter the amount of any excise tax				
3	If the organization incurred a sectio		Yes No		
4a	Was a correction made?		Yes No		
k	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	janization is exempt under	section 501(c), e	except section 501(c)	(3).
1	Enter the amount directly expended	d by the filing organization for secti	on 527 exempt functio	n activities\$	
2	Enter the amount of the filing organ	ization's funds contributed to othe	r organizations for sec	tion 527	
	exempt function activities			\$	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here and	d on Form 1120-POL,		
	line 17b			\$	
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses, and er	mployer identification number (EIN)	of all section 527 poli	tical organizations to which	the filing organization
	made payments. For each organiza	•			•
	contributions received that were pro	· ·		· · · · · · · · · · · · · · · · · · ·	segregated fund or a
	political action committee (PAC). If	additional space is needed, provide	e information in Part IV	'. 	Γ
	<b>(a)</b> 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

WESTERN ASSOCIATION OF FISH AND WILDLIFE Schedule C (Form 990) 2023 AGENCIES 82-0329350 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). 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). if the filing organization checked box A and "limited control" provisions apply. Check (a) Filing (b) Affiliated group Limits on Lobbying Expenditures organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: not over \$500,000, 20% of the amount on line 1e. over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000. over \$1,000,000 but not over \$1,500,000 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) h Subtract line 1g from line 1a. If zero or less, enter -0-Subtract line 1f from line 1c. If zero or less, enter -0ighthere 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? 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)	<b>(a)</b> 2020	<b>(b)</b> 2021	(c) 2022	( <b>d)</b> 2023	(e) Total			
2a Lobbying nontaxable amount								
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))								
c Total lobbying expenditures								
d Grassroots nontaxable amount								
e Grassroots ceiling amount (150% of line 2d, column (e))								
f Grassroots lobbying expenditures								

Schedule C (Form 990) 2023

## Schedule C (Form 990) 2023 AGENCIES 82-03293 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)).

the lobbying activity.			(a) (b)		
the loosying detivity.	Yes	No		Am	ount
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>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
<b>d</b> 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?					
<ul><li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li><li>i Other activities?</li></ul>					
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>b</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?	<b> </b>				
	on sun(c)(	5), or	sec	tion	
art III-A Complete if the organization is exempt under section 501(c)(4), section					
				Yes	N
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).			1	Yes X	N
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?		····-	1 2		N
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	he prior year	? 5), or	2 3 sec	X X	3, is
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the trial organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	he prior year on 501(c)( "No" OR	? 5), or (b) Pa	2 3 sec	X X	2
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from tart III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	he prior year on 501(c)(i "No" OR	? 5), or (b) Pa	2 3 sec art I	X X	2
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from tart III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	he prior year on 501(c)(i "No" OR	? 5), or (b) Pa	2 3 sec art I	X X	2
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	he prior year on 501(c)(i "No" OR	? 5), or : (b) Pa	2 3 sec art I	X X	2
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  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	he prior year on 501(c)(i "No" OR ical	? 5), or : (b) Pa	2 3 sec art I	X X	2
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	he prior year on 501(c)( "No" OR ical	? 5), or s (b) Pa	2 3 sec art I	X X	2
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  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  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	he prior year on 501(c)(i "No" OR ical	? 5), or : (b) Pa	2 3 sec art I 1 2a 2b	X X	2
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  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  b Carryover from last year  c Total	he prior year on 501(c)(i "No" OR ical	? 5), or : (b) Pa	2 3 sec art I 1 2a 2b 2c	X X	2
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members 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 b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	he prior year on 501(c)(i "No" OR ical	? 5), or : (b) Pa	2 3 sec art I 1 2a 2b 2c	X X	2
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  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  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception in the section of the exception is expensed to the amount on line 2.	he prior year on 501(c)(i "No" OR ical	? 5), or : (b) Pa	2 3 sec art I 1 2a 2b 2c	X X	2

#### **SCHEDULE D** (Form 990)

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 Inspection

Name of the organization

WESTERN ASSOCIATION OF FISH AND WILDLIFE **AGENCIES** 

**Employer identification number** 82-0329350

		(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 w	riting that the assets held	in donor advised fun	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pai				
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education)	Preservation of a hist	orically important land area
	Protection of natural habitat		Preservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribut	ion in the form of a co	onservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	cture included on line 2a		2c
d	Number of conservation easements included on line 2c acquir	red after July 25, 2006, an	d not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or ter	minated by the organ	ization during the tax
	year			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspectio	n, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and	enforcing conservation	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handle	ing of violations, and enfo	rcing conservation ea	sements during the year
8	Does each conservation easement reported on line 2d above	•	. , , , , ,	
	and section 170(h)(4)(B)(ii)?			Yes L No
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's fi	nancial statements th	at describes the
<b>D</b> -	organization's accounting for conservation easements.	Aut Historical Topos	Oth C	Similar Assats
Pai	t III Organizations Maintaining Collections of		sures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for pub			nce of public
	service, provide in Part XIII the text of the footnote to its finan-			
b	If the organization elected, as permitted under FASB ASC 958	·		
	art, historical treasures, or other similar assets held for public	exhibition, education, or re	esearch in furtherance	e of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea			provide
	the following amounts required to be reported under FASB AS			
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990 Part X			\$

#### WESTERN ASSOCIATION OF FISH AND WILDLIFE

Schedule D (Form 990) 2023 AGENCIES 82-0329350 Page 2

Par	t III (	Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	easures, or O	ther S	imilar	Assets	(contin	ued)	
3	Using th	ne organization's acquisition, accessi	on, and other record	s, check	any of the	following that ma	ke signi	ficant u	ise of its			
	collection	on items (check all that apply).										
а	P	ublic exhibition	c	i 🔲 i	Loan or exc	change program						
b	S S	cholarly research	e	, 🔲	Other							
С	P	reservation for future generations										
4	Provide	a description of the organization's co	ollections and explain	n how th	ey further th	ne organization's	exempt	purpos	se in Part	XIII.		
5	During t	he year, did the organization solicit o	r receive donations	of art, his	storical trea	sures, or other si	milar as	sets				
	to be so	old to raise funds rather than to be ma	aintained as part of t	he organ	ization's co	llection?				Yes		No
Par	t IV	Escrow and Custodial Arran	gements Comple	te if the	organizatio	n answered "Yes	" on For	m 990,	Part IV, li	ne 9, or		
	r	eported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the or	rganization an agent, trustee, custodi	an, or other intermed	diary for	contributior	ns or other assets	s not inc	luded				
	on Form	n 990, Part X?								Yes		No
b		explain the arrangement in Part XIII										
										Amount		
С	Beginni	ng balance						1c				
d	Addition	ns during the year						1d				
		tions during the year						1e				
f		balance						1f				
2a		organization include an amount on F							$\square$	Yes		No
b	If "Yes,'	explain the arrangement in Part XIII.	Check here if the ex	planatio	n has been	provided in Part	XIII					
Par	t V	Endowment Funds Complete if	the organization ans	swered "	Yes" on Fo	rm 990, Part IV, I	ine 10.					
			(a) Current year	<b>(b)</b> P	rior year	(c) Two years ba	ack (d)	Three y	ears back	(e) Four	years	back
1a	Beginni	ng of year balance										
		utions										
		estment earnings, gains, and losses										
d	Grants	or scholarships										
		xpenditures for facilities										
	and pro											
f	•	strative expenses										
g		vear balance										
2	-	the estimated percentage of the curr	rent year end balance	e (line 1a	ı, column (a	i)) held as:	•					
а		lesignated or quasi-endowment		%	,,	,,						
b	Perman	ent endowment	%	_								
С	Term er	ndowment	<del></del> %									
	The per	centages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	•	re endowment funds not in the posse	•	ation that	t are held a	nd administered	for the					
		ation by:	· ·								Yes	No
	-	elated organizations?								3a(i)		
										3a(ii)		
b		on line 3a(ii), are the related organiza										
4		e in Part XIII the intended uses of the										
Par		and, Buildings, and Equipm										
		Complete if the organization answere	d "Yes" on Form 990	), Part IV	, line 11a. S	See Form 990, Pa	art X, line	e 10.				
		Description of property	(a) Cost or o	ther	(b) Cost	t or other	(c) Accı	ımulate	ed	(d) Book	valu	<u>——</u> е
			basis (investr		. ,	(other)		ciation				
1a	Land											
		js										
		old improvements										
		ent										
			I									
		20 10 through 10 (0.1 (1)				(2))						0

Schedule D (Form 990) 2023

2-0	3	29	3.	50	Page	3
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Schedule D	(Form 990) 2023 AGENCIE				82-0329350 Page <b>3</b>
Part VII	Investments - Other Securit	ies			
	Complete if the organization answere	ed "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Descrip	otion of security or category (including name o	f security)	(b) Book value	(c) Method of valuation: Cost of	or end-of-year market value
	al derivatives				•
. ,	held equity interests				_
	Tield equity litterests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (	b) must equal Form 990, Part X, line 12, co	I. (B))			
Part VIII	Investments - Program Rela	ated.			
	Complete if the organization answere	ed "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 of	r end-of-year market value
(1)	, ,		. ,	,	· · · · · · · · · · · · · · · · · · ·
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. (	b) must equal Form 990, Part X, line 13, co	l. (B))			
Part IX	Other Assets				
	Complete if the organization answere	ed "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
		(a)	Description		(b) Book value
(1) DU	JE FROM AFFILIATES				203,197.
$\underline{}$	PERATING LEASE RIGHT	OF	USE ASSET		20,718.
(3)					
(4)					
					<del></del>
(5)					
(6)					<del> </del>
(7)					
(8)					
(9)					
Total. (Colu	ımn (b) must equal Form 990, Part X, lii	ne 15, co	ol. (B))		223,915.
Part X	Other Liabilities				
	Complete if the organization answere	ed "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, lin	
1.	(a) Description of liabil	ity			(b) Book value
(1) Fed	deral income taxes				
(2) OF	PERATING LEASE LIABI	LITY			21,108.
(3)					
(4)					
(5)					
					<del> </del>
(6)					+
(7)					
(8)					
(9)					
Total. (Colu	ımn (b) must equal Form 990, Part X, liı	ne 25, co	ol. (B))		21,108.

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

	dule D (Form 990) 2023 AGENCIES			1329350	Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per F	Return		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	i <b>.</b>			
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:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е	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:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	. 4b			
С	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		. 5		
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	r Return		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	i.			
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:				
а	Donated services and use of facilities	_ <b>2</b> a			
b	Prior year adjustments	2b			
С	Other losses				
d	Other (Describe in Part XIII.)	I I			
е	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:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	. 4b			
С	Add lines 4a and 4b	·····	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)				
Pa	t XIII Supplemental Information				
Provi	de 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	e 4· Part X	line 2. Part X	I

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART X, LINE 2:

THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THAT GUIDANCE, THE ORGANIZATION MAY RECOGNIZE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR THE FISCAL YEAR ENDED JUNE 30,

#### WESTERN ASSOCIATION OF FISH AND WILDLIFE

Schedule D (Form 990) 2023 AGENCIES Part XIII Supplemental Information (continued)	82-0329350	Page 5
Part XIII   Supplemental Information (continued)		
2024. THE ASSOCIATION FILES FORM 990 IN THE U.S. FEDERAL JUR	ISDICTION.	
THE ASSOCIATION IS GENERALLY NO LONGER SUBJECT TO EXAMINATION	N BY THE	
INTERNAL REVENUE SERVICE FOR YEARS BEFORE 2020.		

#### **SCHEDULE J** (Form 990)

Department of the Treasury

Internal Revenue Service

Part I

**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.

**Open to Public** Inspection

OMB No. 1545-0047

Name of the organization

**Questions Regarding Compensation** 

WESTERN ASSOCIATION OF FISH AND WILDLIFE **AGENCIES** 

Employer identification number 82-0329350

			Yes	No
<b>1</b> a	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.			
	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	Х	
	, , , , , , , , , , , , , , , , , , , ,			
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.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X 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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	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:			
а	The organization?	5a		X
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
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:			
а	The organization?	6a		X
	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
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		Х
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		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

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

**AGENCIES** 

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.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DR. ZACHARY LOWE	(i)	153,860.	0.	0.	7,693.	0.	161,553.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	ii)							
	(i)							
	ii)							
1	(i)							
(	ii)							
	(i)							
(	ii)							
	(i)							
	ii)							
	(i)							
·	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							
	(i) ii)							
	(i) ii)							
	'') (i)							
	ii)							
	i) (i)							
	ii)							

#### WESTERN ASSOCIATION OF FISH AND WILDLIFE

#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

WESTERN ASSOCIATION OF FISH AND WILDLIFE AGENCIES

Employer identification number 82-0329350

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

EXECUTIVE LEADERSHIP MEETING PROVIDES A PLATFORM FOR OUR MEMBER AGENCY

DIRECTORS, DEPUTIES, AND COMMISSIONERS TO DISCUSS EMERGING WESTERN

ISSUES AND STRATEGICALLY MOVE TASKS FORWARD TO THE ANNUAL SUMMER

MEETING.

WAFWA HOSTS WORKSHOPS, SUMMITS, AND OTHER ONE-OFF EVENTS TO PROVIDE OUR

MEMBER AGENCIES TO COMMUNICATE WITH EACH ANOTHER ON NEW RESEARCH,

MANAGEMENT, ENFORCEMENT, AND ADMINISTRATIVE PRACTICES AND TO USE THIS

INFORMATION TO PROMOTE BETTER MANAGEMENT OF SPECIES OR ADMINISTRATION

OF MEMBER AGENCIES. WAFWA HOSTS BOTH SPECIES-SPECIFIC WORKSHOPS LIKE

THE PRONGHORN WORKSHOP (HELD BIENNIALLY), WESTERN STATES/PROVINCES DEER

AND ELK WORKSHOP (HELD BIENNIALLY), AND MOUNTAIN LION WORKSHOP (HELD

TRIENNIALLY) AS WELL AS TOPIC-BASED WORKSHOPS SUCH AS CONSERVATION

BUSINESS MANAGERS ASSOCIATION WORKSHOP (HELD ANNUALLY) AND THE WAFWA R3

SYMPOSIUM (HELD ANNUALLY). IN ANY GIVEN YEAR, WAFWA HOSTS BETWEEN 5 TO

8 OF THESE EVENTS.

FORM 990, PART VI, SECTION A, LINE 1A:

THE ORGANIZATION'S BOARD OF DIRECTORS DELEGATES AUTHORITY TO THE EXECUTIVE

COMMITTEE TO ACT ON BEHALF OF THE GOVERNING BODY. THE PRESIDENT,

VICE-PRESIDENTS, BUDGET AND FINANCE CHAIR AND FOUR AT LARGE MEMBER

DIRECTORS SELECTED BY THE PRESIDENT AND THE CHAIR OF THE COMMISSIONERS MAKE

UP THE EXECUTIVE COMMITTEE. THE SCOPE OF THE EXECUTIVE COMMITTEE IS BINDING

AUTHORITY ON BEHALF OF THE ASSOCIATION AND ITS MEMBERS.

Schedule O (Form 990) 2023 Page **2** 

Name of the organization WESTERN ASSOCIATION OF FISH AND WILDLIFE AGENCIES

Employer identification number 82-0329350

FORM 990, PART VI, SECTION A, LINE 2:

BOARD MEMBERS SERVE AS BOARD MEMBERS OF RELATED ORGANIZATIONS, THEREFORE A
BUSINESS RELATIONSHIP EXISTS BETWEEN THE OFFICERS AND BOARD MEMBERS.

FORM 990, PART VI, SECTION A, LINE 6:

THE MEMBERSHIP CONSISTS OF STATE CHIEF ADMINISTRATIVE OFFICERS OF THE FISH

AND GAME AGENCIES, OR THEIR EQUIVALENTS WITHIN THE STATES OF ALASKA,

ARIZONA, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, MONTANA, NEBRASKA,

NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, SOUTH DAKOTA, TEXAS,

UTAH, WASHINGTON AND WYOMING, OF THE PROVINCES OF BRITISH COLUMBIA,

ALBERTA, SASKATCHEWAN AND THE YUKON AND NORTHWEST TERRITORIES.

FORM 990, PART VI, SECTION B, LINE 11B:

THE EXECUTIVE DIRECTOR REVIEWS THE FORM 990 AND SHARES WITH THE WAFWA

OFFICERS PRIOR TO FINAL APPROVAL AND DISTRIBUTION TO THE EXECUTIVE

COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL COMMITTEE MEMBERS AND EMPLOYEES ARE COVERED BY THE CONFLICT OF INTEREST

POLICY AND THE POLICY IS REVIEWED ANNUALLY. ANY POTENTIAL CONFLICTS ARE

REVIEWED WITH THE EXECUTIVE COMMITTEE AND ANY ISSUES THAT ARISE ARE HANDLED

ON AN INDIVIDUAL BASIS DEPENDING UPON THE CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15B:

THE EXECUTIVE DIRECTOR'S COMPENSATION IS ANNUALLY REVIEWED AND APPROVED BY
THE BOARD OF DIRECTORS.

Schedule O (Form 990) 2023	Page 2
Name of the organization WESTERN ASSOCIATION OF FISH AND WILDLIFE AGENCIES	Employer identification number 82-0329350
THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATE	EMENTS AND
CONFLICT OF INTEREST STATEMENTS ARE AVAILABLE UPON REQUEST	? <b>.</b>
THE BYLAWS AND FORM 990 ARE AVAILABLE UPON REQUEST AND ALSO OUR WEBSITE AT WWW.WAFWA.ORG.	SO AVAILABLE ON
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONTRACT SERVICES:	
PROGRAM SERVICE EXPENSES	22,975.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	22,975.
SUBCONTRACTOR FOR ARIAL SURVEYS:	
PROGRAM SERVICE EXPENSES	50,596.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	50,596.
COMMUNICATION:	
PROGRAM SERVICE EXPENSES	24,726.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	24,726.
GRANT COORDINATION:	
PROGRAM SERVICE EXPENSES	504,941.
MANAGEMENT AND GENERAL EXPENSES	0.
332212 11-14-23	Schedule O (Form 990) 2023

#### **SCHEDULE R** (Form 990)

#### **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.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service WESTERN ASSOCIATION OF FISH AND WILDLIFE Name of the organization **Employer identification number** 82-0329350 **AGENCIES** 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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr enti	olled
				501(c)(3))		Yes	No
FOUNDATION FOR WESTERN FISH & WILDLIFE	SUPPORTS WESTERN				WESTERN		
AGENCIES - 26-2849591, PO BOX 190150, BOISE,	ASSOCIATION OF FISH AND				ASSOCIATION OF		
ID 83719	WILDLIFE AGENCIES EFFORTS	IDAHO	501(C)(3)	LINE 7	FISH AND WILDLIFE	Х	
	SUPPORTS WESTERN				WESTERN		
WAFWA SPECIES RESTORATION FOUNDATION -	ASSOCIATION OF FISH AND				ASSOCIATION OF		
46-5570304, PO BOX 190150, BOISE, ID 83719	WILDLIFE AGENCIES EFFORTS	IDAHO	501(C)(4)		FISH AND WILDLIFE	X	

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

Page 2

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)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	1	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partr	Percentag ging ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	10

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(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		tion b)(13) rolled tity?
		country)		,				Yes	No
-									
-									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one	or more rel	ated organizations listed in	n Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
	Gift, grant, or capital contribution to related organization(s)				1b	Х	
	Gift, grant, or capital contribution from related organization(s)				1c		X
	Loans or loan guarantees to or for related organization(s)				1d		X
	Loans or loan guarantees by related organization(s)				1e	Х	
f	Dividends from related organization(s)				1f		_X_
g	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		X
i	Exchange of assets with related organization(s)				1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		_X_
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		_X_
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				11		X
m	n Performance of services or membership or fundraising solicitations by related organization(s)				1m	Х	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		X
0	Sharing of paid employees with related organization(s)				10	Х	
р	Reimbursement paid to related organization(s) for expenses				1p		_X_
q	Reimbursement paid by related organization(s) for expenses				1q	Х	
r	Other transfer of cash or property to related organization(s)				1r		<u>X</u>
s	Other transfer of cash or property from related organization(s)				1s		_X_
2	If the answer to any of the above is "Yes," see the instructions for information on who must co	omplete thi	s line, including covered re	elationships and transaction thresholds.			
	(a) (b) Name of related organization Transatype	action	(c) Amount involved	(d) Method of determining amount inv	olved		
(1) [	WAFWA SPECIES RESTORATION FOUNDATION Q		83,798.	COST OF SERVICES			
(2) V	WAFWA SPECIES RESTORATION FOUNDATION O		180,787.	COST OF SERVICES			
(3)							
(4)							

(5)

**AGENCIES** 

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) r Percentage ownership
	-									

#### WESTERN ASSOCIATION OF FISH AND WILDLIFE

**AGENCIES** 82-0329350 Page 5 Schedule R (Form 990) 2023 Part VII | Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions. PART II, IDENTIFICATION OF RELATED TAX EXEMPT ORGANIZATIONS NAME OF RELATED ORGANIZATION: FOUNDATION FOR WESTERN FISH & WILDLIFE AGENCIES DIRECT CONTROLLING ENTITY: WESTERN ASSOCIATION OF FISH AND WILDLIFE **AGENCIES** NAME OF RELATED ORGANIZATION: WAFWA SPECIES RESTORATION FOUNDATION DIRECT CONTROLLING ENTITY: WESTERN ASSOCIATION OF FISH AND WILDLIFE AGENCIES