

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
**Do not enter social security numbers on this form as it may be made public.**  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2022**

Open to Public Inspection

**A** For the **2022** calendar year, or tax year beginning and ending

<b>B</b> Check if applicable:  Address change Name change Initial return Final return/terminated Amended return Application pending	<b>C</b> Name of organization <b>NATIONAL DEER ASSOCIATION GROUP RETURN</b>		<b>D</b> Employer identification number <b>90-0201257</b>
	Doing business as		<b>E</b> Telephone number <b>706-353-0221</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>1,072,453.</b>
	<b>PO BOX 160</b>		<b>H(a)</b> Is this a group return <b>STMT 1</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>BOGART, GA 30622</b>		for subordinates? <input checked="" type="checkbox"/> <b>Yes</b> <b>No</b>
<b>F</b> Name and address of principal officer: <b>NICK PINIZZOTTO</b> <b>SAME AS C ABOVE</b>			<b>H(b)</b> Are all subordinates included? <input checked="" type="checkbox"/> <b>Yes</b> <b>No</b>
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) ( ) (insert no.) 4947(a)(1) or 527			If "No," attach a list. See instructions
<b>J</b> Website: <b>WWW.DEERASSOCIATION.COM</b>			<b>H(c)</b> Group exemption number <b>3927</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other			<b>L</b> Year of formation: <b>2002</b> <b>M</b> State of legal domicile: <b>SC</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>IN 2022, NDA HAD A SIGNIFICANT IMPACT ON POLICY THAT IMPACTS DEER, HUNTING, AND CONSERVATION.</b>
	<b>2</b> Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) <b>3</b> <b>16</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <b>4</b> <b>16</b>
	<b>5</b> Total number of individuals employed in calendar year 2022 (Part V, line 2a) <b>5</b> <b>0</b>
	<b>6</b> Total number of volunteers (estimate if necessary) <b>6</b> <b>820</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12 <b>7a</b> <b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 <b>7b</b> <b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) <b>Prior Year</b> <b>37,942.</b> <b>Current Year</b> <b>622,175.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) <b>0.</b> <b>0.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>828.</b> <b>244.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>123,710.</b> <b>-176,231.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>162,480.</b> <b>446,188.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) <b>58,838.</b> <b>319,570.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) <b>0.</b> <b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>0.</b> <b>0.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>0.</b> <b>0.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>6,906.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <b>37,757.</b> <b>112,886.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <b>96,595.</b> <b>432,456.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 <b>65,885.</b> <b>13,732.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) <b>Beginning of Current Year</b> <b>1,516,230.</b> <b>End of Year</b> <b>1,529,962.</b>
	<b>21</b> Total liabilities (Part X, line 26) <b>0.</b> <b>0.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 <b>1,516,230.</b> <b>1,529,962.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer	Date			
	<b>APRIL ROBERTSON, CFO</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>ALEISA HOWELL</b>	Preparer's signature <b>ALEISA HOWELL</b>	Date <b>11/15/23</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00936721</b>
	Firm's name <b>MAULDIN &amp; JENKINS, LLC</b>	Firm's address <b>200 GALLERIA PKWY SE STE 1700 ATLANTA, GA 30339-5946</b>	Firm's EIN <b>58-0692043</b>	Phone no. <b>770-955-8600</b>	

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

Part 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: SEE SCHEDULE O

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 410,011. including grants of \$ 319,570. ) (Revenue \$ ) SEE SCHEDULE O

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

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

4e Total program service expenses 410,011.

**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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	X	
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question number, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee reporting, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	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.		
	1a		16
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	1b		16
<b>2</b>	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?		X
<b>3</b>	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?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?	X	
<b>7a</b>	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?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed GA
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website      Another's website       Upon request      Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records  
APRIL ROBERTSON, CFO - 706-353-0221  
PO BOX 160, BOGART, GA 30622

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

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

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NICK PINIZZOTTO PRESIDENT & CEO	2.00 50.00			X				0.	0.	0.
(2) APRIL ROBERTSON CHIEF FINANCIAL OFFICER	2.00 50.00			X				0.	0.	0.
(6) ROLAND DUGAS III CHAIRMAN	5.00 5.00	X		X				0.	0.	0.
(7) SAM BURGESSON VICE- CHAIRMAN	3.00 3.00	X		X				0.	0.	0.
(8) CHRIS DOLNACK TREASURER	3.00 3.00	X		X				0.	0.	0.
(9) RONNIE "CUZ" STRICKLAND SECRETARY	3.00 3.00	X		X				0.	0.	0.
(10) GREG SIMONS MEMBER AT LARGE	3.00 3.00	X						0.	0.	0.
(11) JOSEPH HAMILTON BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(12) LEON HANK BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(13) JOHN ANNONI BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(14) DAN FORSTER BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(15) RICK DAHL BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(16) ARTHUR DICK BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(17) BRYAN BURHANS BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(18) ROBERT ZIEHMER BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(19) NATALIE KREBS BOARD MEMBER	2.00 2.00	X						0.	0.	0.
(20) JOSH KUDER BOARD MEMBER	2.00 2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(21) WHIT FOSBURGH BOARD MEMBER	2.00 2.00	X						0.	0.	0.
<b>1b Subtotal</b> .....								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b> .....								0.	0.	0.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b>	Federated campaigns	<b>1a</b>					
	<b>b</b>	Membership dues	<b>1b</b>	74,895.				
	<b>c</b>	Fundraising events	<b>1c</b>	487,097.				
	<b>d</b>	Related organizations	<b>1d</b>					
	<b>e</b>	Government grants (contributions)	<b>1e</b>					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	60,183.				
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f		622,175.				
Program Service Revenue	<b>2 a</b>		<b>Business Code</b>					
	<b>b</b>							
	<b>c</b>							
	<b>d</b>							
	<b>e</b>							
	<b>f</b>	All other program service revenue						
	<b>g</b>	<b>Total.</b> Add lines 2a-2f						
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts)		244.		244.		
	<b>4</b>	Income from investment of tax-exempt bond proceeds						
	<b>5</b>	Royalties						
	<b>6 a</b>	Gross rents	<b>6a</b>	(i) Real				
				(ii) Personal				
	<b>b</b>	Less: rental expenses	<b>6b</b>					
	<b>c</b>	Rental income or (loss)	<b>6c</b>					
	<b>d</b>	Net rental income or (loss)						
	<b>7 a</b>	Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
				(ii) Other				
	<b>b</b>	Less: cost or other basis and sales expenses	<b>7b</b>					
	<b>c</b>	Gain or (loss)	<b>7c</b>					
	<b>d</b>	Net gain or (loss)						
<b>8 a</b>	Gross income from fundraising events (not including \$ 487,097. of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>		121,774.				
			<b>b</b>	Less: direct expenses	<b>8b</b>	131,394.		
			<b>c</b>	Net income or (loss) from fundraising events		-9,620.		-9,620.
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19	<b>9a</b>		328,260.				
			<b>b</b>	Less: direct expenses	<b>9b</b>	494,871.		
			<b>c</b>	Net income or (loss) from gaming activities		-166,611.		-166,611.
<b>10 a</b>	Gross sales of inventory, less returns and allowances	<b>10a</b>						
			<b>b</b>	Less: cost of goods sold	<b>10b</b>			
			<b>c</b>	Net income or (loss) from sales of inventory				
Miscellaneous Revenue	<b>11 a</b>		<b>Business Code</b>					
	<b>b</b>							
	<b>c</b>							
	<b>d</b>	All other revenue						
	<b>e</b>	<b>Total.</b> Add lines 11a-11d						
<b>12</b>	<b>Total revenue.</b> See instructions		446,188.	0.	0.	-175,987.		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	319,570.	319,570.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages				
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes				
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting				
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
<b>12</b> Advertising and promotion	20,824.	18,117.	1,874.	833.
<b>13</b> Office expenses	3,178.	2,764.	287.	127.
<b>14</b> Information technology	416.	362.	37.	17.
<b>15</b> Royalties				
<b>16</b> Occupancy				
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization				
<b>23</b> Insurance				
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a OTHER OPERATING EXPENSE</b>	84,436.	65,690.	12,978.	5,768.
<b>b PRINTING</b>	4,032.	3,508.	363.	161.
<b>c</b>				
<b>d</b>				
<b>e</b> All other expenses				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	432,456.	410,011.	15,539.	6,906.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	1,516,230.	<b>1</b>	1,529,962.
	<b>2</b> Savings and temporary cash investments		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net		<b>3</b>	
	<b>4</b> Accounts receivable, net		<b>4</b>	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		<b>6</b>	
	<b>7</b> Notes and loans receivable, net		<b>7</b>	
	<b>8</b> Inventories for sale or use		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b>		
	<b>b</b> Less: accumulated depreciation	<b>10b</b>		<b>10c</b>
	<b>11</b> Investments - publicly traded securities		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11		<b>13</b>	
	<b>14</b> Intangible assets		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33)		1,516,230.	<b>16</b>	1,529,962.
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses		<b>17</b>	
	<b>18</b> Grants payable		<b>18</b>	
	<b>19</b> Deferred revenue		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25		0.	<b>26</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions	1,516,230.	<b>27</b>	1,529,962.
	<b>28</b> Net assets with donor restrictions		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
	<b>32</b> Total net assets or fund balances	1,516,230.	<b>32</b>	1,529,962.
<b>33</b> Total liabilities and net assets/fund balances	1,516,230.	<b>33</b>	1,529,962.	

**Part 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	446,188.
2	Total expenses (must equal Part IX, column (A), line 25)	2	432,456.
3	Revenue less expenses. Subtract line 2 from line 1	3	13,732.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,516,230.
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	1,529,962.

**Part XII Financial Statements and Reporting**

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

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

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: NATIONAL DEER ASSOCIATION GROUP RETURN
Employer identification number: 90-0201257

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 [X] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 An organization organized and operated exclusively to test for public safety.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization.
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) .....	14	%
<b>15</b> Public support percentage from 2021 Schedule A, Part II, line 14 .....	15	%
<b>16a 33 1/3% support test - 2022.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		
<b>b 33 1/3% support test - 2021.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		
<b>17a 10% -facts-and-circumstances test - 2022.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		
<b>b 10% -facts-and-circumstances test - 2021.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	190,001.	165,769.	92,543.	37,942.	622,175.	1108430.
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	329,221.	241,819.	1989381.	904,515.		3464936.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	519,222.	407,588.	2081924.	942,457.	622,175.	4573366.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
<b>c</b> Add lines 7a and 7b						0.
<b>8 Public support.</b> (Subtract line 7c from line 6.)						4573366.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>9</b> Amounts from line 6	519,222.	407,588.	2081924.	942,457.	622,175.	4573366.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	143.	95.	837.	828.	244.	2,147.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	143.	95.	837.	828.	244.	2,147.
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	519,365.	407,683.	2082761.	943,285.	622,419.	4575513.

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	99.95 %
<b>16</b> Public support percentage from 2021 Schedule A, Part III, line 15	16	99.94 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	.05 %
<b>18</b> Investment income percentage from 2021 Schedule A, Part III, line 17	18	.05 %

**19a 33 1/3% support tests - 2022.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2021.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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



**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally Integrated Supporting Organizations**

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

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

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

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

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

Section D - Distributions		Current Year
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2022 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
<b>1</b> Distributable amount for 2022 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017			
<b>b</b> From 2018			
<b>c</b> From 2019			
<b>d</b> From 2020			
<b>e</b> From 2021			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2022 distributable amount			
<b>i</b> Carryover from 2017 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2022 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2023.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2018			
<b>b</b> Excess from 2019			
<b>c</b> Excess from 2020			
<b>d</b> Excess from 2021			
<b>e</b> Excess from 2022			



FORM 990

LINE H(B) - LIST OF AFFILIATED  
ORGANIZATIONS INCLUDED IN GROUP RETURN

STATEMENT 1

NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID
ACE BASIN BRANCH #1019 OF THE NATIONAL DEER ASSOCIATION	1425 GARRIS AVENUE - WILLIAM, SC 29493	90-0531403
ATHENS BRANCH# 1129 OF THE NATIONAL DEER ASSOCIATION	280 LOWER WIREBRIDGE RD - STEPHENS, GA 30667	90-1122908
BARRY COUNTY BRANCH #2014 OF THE NATIONAL DEER ASSOCIATION	440 GASKILL ROAD - HASTING, MI 49058	90-0201267
BAYOU BRANCH #2913 OF THE NATIONAL DEER ASSOCIATION	435 CROSSING NORTH ST - THIBODAUX, LA 70301	90-0902754
BLACK DIRT BRANCH # 2328 OF THE NATIONAL DEER ASSOCIATION	1961 MOUNTAIN RD - OTISVILLE, NY 10963	90-1190280
BLUE MOUNTAIN# 2229 OF THE NATIONAL DEER ASSOCIATION	46 IRONWOOD LN - JONESTOWN, PA 17038	90-1256124
BLUE RIDGE BRANCH #1234 OF THE NATIONAL DEER ASSOCIATION	91 FURZWEGO DRIVE - MILLS RIVER, NC 28759	90-1260638
BLUEGRASS ASSOCIATION BRANCH #3120 OF THE NATIONAL DEER ASSOCIATION	416 E 24TH ST - OWENSBORO, KY 42303	36-5044830
BLUEGRASS BRANCH #3105 OF THE NATIONAL DEER ASSOCIATION	3675 GOLDSVALLEY RD - DRY RIDGE, KY 41035	90-0298365
BLUESTEM BRANCH #4005 OF THE NATIONAL DEER ASSOCIATION	2873 SE HWY 54 - EL DORADO, KS 67042	90-0745920
BLUFFS & BAYOUS BRANCH #2615 OF THE NATIONAL DEER ASSOCIATION	313 COVINGTON COVE - MADISON, MS 39110	90-1076027
BRAZOS VALLEY BRANCH #1419 OF THE NATIONAL DEER ASSOCIATION	1612 B PARK PLACE - COLLEGE STATION, TX 77840	90-1254996
BUFFALO NIAGARA BRANCH #2323 OF THE NATIONAL DEER ASSOCIATION	5166 MILITARY ROAD - LEWISTON, NY 14092	90-1116978

STATEMENT(S) 1

NATIONAL DEER ASSOCIATION GROUP RETURN

90-0201257

CADILLAC AREA BRANCH #2032 OF THE NATIONAL DEER ASSOCIATION	19035 APPLEBY RD - TUSTIN, MI 49688	90-1028276
CAPITAL AREA BRANCH #2022 OF THE NATIONAL DEER ASSOCIATION	3582 LYONS ROAD - MASON, MI 48854	90-0357664
CAPITAL CITY BRANCH #1828 OF THE NATIONAL DEER ASSOCIATION	326 SUGAR AVENUE #4 - BELLEVILLE, WI 53508	37-1803963
CAPITAL DISTRICT NEW YORK BRANCH#2319 OF THE NATIONAL DEER ASSOCIATION	25 CHERRYVALE BLVA - SLINGERLANDS, NY 12159	90-1070593
CATAWBA RIVER BRANCH #1041 OF THE NATIONAL DEER ASSOCIATION	6510 SHILOH UNITY RD. - LANCASTER, SC 29720	90-1244625
CEDAR BOTTOM BRANCH #1827 OF THE NATIONAL DEER ASSOCIATION	330 WINCHESTER DRIVE - SEYMOUR, WI 54165	90-1087562
CENTRAL APPALACHIAN BRANCH# 3507 OF THE NATIONAL DEER ASSOCIATION	180 BASSWOOD DR - MT. NEBO, WV 26679	90-1186879
CENTRAL FLORIDA # 2415 OF THE NATIONAL DEER ASSOCIATION	5435 SE 140TH ST - SUMMERFIELD, FL 34491	90-1190215
CENTRAL KENTUCKY BRANCH #3119 OF THE NATIONAL DEER ASSOCIATION	1406 WILDCAT RD - LAWRENCEBURG, KY 40342	35-2621714
CENTRAL LOUISIANA BRANCH #2904 OF THE NATIONAL DEER ASSOCIATION	563 SCHEXNYDER RD. - MANSURA, LA 71350	90-0056139
CENTRAL MICHIGAN #2024 OF THE NATIONAL DEER ASSOCIATION	8580 OLIVE RD - ELWELL, MI 48832	90-0374626
CENTRAL NEW YORK BRANCH #2304 OF THE NATIONAL DEER ASSOCIATION	61 LAKE SHORE RD - OSWEGO, NY 13126	90-0183459
CENTRAL WISCONSIN BRANCH #1803 OF THE NATIONAL DEER ASSOCIATION	1031 WEEPING WILLOW DRIVE - WISCONSIN RAPIDS, WI 54494	90-0056114
CLINTON/IONIA COUNTY BRANCH #2020 OF THE NATIONAL DEER ASSOCIATION	2101 YALLUP RD. - ST. JOHNS, MI 48879	90-0183462
COASTAL EMPIRE #1119 OF THE NATIONAL DEER ASSOCIATION	687 CAMELLIA DRIVE - PEMBROKE, GA 31321	90-0958051
CONECUH RIVER BRANCH #1515 OF THE NATIONAL DEER ASSOCIATION	17996 STUNT WOOD RD. - ANDALUSIA, AL 36421	90-1185262
COOSAWATTEE BRANCH #1137 OF THE NATIONAL DEER ASSOCIATION	P.O. BOX 882 - CHATSWORTH, GA 30705	90-1896910
COSTABELLA BRANCH #2031 OF THE NATIONAL DEER ASSOCIATION	8700 EAST GRASS LAKE ROAD - CLARE, MI 48617	90-0819324
COULEE COUNTRY BRANCH #1829 OF THE NATIONAL DEER ASSOCIATION	703 PLEASANT OAK DRIVE - OREGON, WI 53575	35-2558445
COWANESQUE VALLEY BRANCH #2208 OF THE NATIONAL DEER ASSOCIATION	4528 ROUTE 49 - KNOXVILLE, PA 16928	90-0183484
CSRA BRANCH #1135 OF THE NATIONAL DEER ASSOCIATION	4249 THOMSON HWY - WARRENTON, GA 30828	90-1503423
D/B/A NEW YORK STATE ADVISORY COUNCIL #2301 OF THE NATIONAL DEER ASSOCIATION	103 PHILO ROAD WEST - ELMIRA, NY 14903	90-0238893
D/B/A PALMETTO SAC #1001 OF THE NATIONAL DEER ASSOCIATION	P.O. BOX 20813 - CHARLESTON, SC 29412	90-0286990

NATIONAL DEER ASSOCIATION GROUP RETURN

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D/B/A ROCKY TOP BRANCH # 1314 - "BONERUSHERS" OF THE NATIONAL DEER ASSOCIAT DELAWARE BRANCH #1702 OF THE NATIONAL DEER ASSOCIATION DELAWARE STATE CHAPTER #1701 OF THE NATIONAL DEER ASSOCIATION DERBY CITY BRANCH #3109 OF THE NATIONAL DEER ASSOCIATION EASTERN IOWA BRANCH #4311 OF THE NATIONAL DEER ASSOCIATION EASTERN OKLAHOMA BRANCH #4402 OF THE NATIONAL DEER ASSOCIATION EATON COUNTY BRANCH #2008 OF THE NATIONAL DEER ASSOCIATION ELK RIVER BRANCH #1307 OF THE NATIONAL DEER ASSOCIATION ESCAMBIA BRANCH # 2412 OF THE NATIONAL DEER ASSOCIATION FARM COUNTRY WHITETAILS BRANCH #3313 OF THE NATIONAL DEER ASSOCIATION FIRST NEW HAMPSHIRE BRANCH #5202 OF THE NATIONAL DEER ASSOCIATION FLINT RIVER BRANCH #1132 OF THE NATIONAL DEER ASSOCIATION FOOTHILLS BRANCH #1020 OF THE NATIONAL DEER ASSOCIATION FROSTY TINES BRANCH #3315 OF THE NATIONAL DEER ASSOCIATION GRANVILLE COUNTY BRANCH #1237 OF THE NATIONAL DEER ASSOCIATION GREATER HOUSTON BRANCH #1420 OF THE NATIONAL DEER ASSOCIATION GREATER ROCHESTER SOUTHERN TIER #2317 OF THE NATIONAL DEER ASSOCIATION HALL OF FAME BRANCH #3717 OF THE NATIONAL DEER ASSOCIATION HEART OF DIXIE #1511 OF THE NATIONAL DEER ASSOCIATION HUDSON VALLEY BRANCH #2310 OF THE NATIONAL DEER ASSOCIATION ILLINOIS STATE CHAPTER #3901 OF THE NATIONAL DEER ASSOCIATION INDIANA HEARTLAND BRANCH #3202 OF THE NATIONAL DEER ASSOCIATION KENTUCKY HEARTLAND #3110 OF THE NATIONAL DEER ASSOCIATION KENTUCKY SAC # 3118 OF THE NATIONAL DEER ASSOCIATION	PO BOX 160 - BOGART, GA 30622  14617 ARVEY RD - LAUREL, DE 19956 21140 LONE CYPRESS RD. - MILLSBORO, DE 19966  7011 BREAKWATER PLACE - PROSPECT, KY 40059 1916 EASTON AVE - WATERLOO, IA 50702 8120 W. 81ST ST - TULSA, OK 74131  2265 S STEWART RD - CHARLOTTE, MI 48813 198 HUNT ST - MANCHESTER, TN 37355-2945 3691 EUBANKS RD - WALNUT HILL, FL 32568 136 MAIN STREET NORTH - WINNEBAGO, MN 56098  168 GRANITE STREET - ALLEN TOWN, NH 03275  200 POLLARD ROAD - TEMPLE, GA 30179 14 BLACKBURN STREET - GREENVILLE, SC 29607 340 TINDOLPH AVE N - THIEF RIVER FALLS, MN 56701 P.O. BOX 3 - STOVALL, NC 27582  504 ASBURY STREET - HOUSTON, TX 77007  1311 MIDDLE ROAD - RUSH, NY 14543  13130 WARREN RD NE - PARIS, OH 44669 1631 PANORAMA LANE - VESTAVIA HILLS, AL 35216 262 CHESTNUT HILL RD - STONE RIDGE, NY 12484 576 300TH STREET - NORTH HENDERSON, IL 61466  3814N 300 W - MCCORDSVILLE, IN 46055  12593 SALT RIVER RD - EASTVIEW, KY 42732-9726 8023 DAWSON HILL ROAD - LOUISVILLE, KY 40299	90-0925270  90-0201258 90-0224614 90-0527251 36-5049784 80-0132643 90-0056130 90-0334438 90-1139486 90-1070439 90-0183467 90-1254998 90-0557052 90-1254997 90-1897360 90-1510441 90-0897527 90-1132521 90-1121659 90-0235916 90-0627274 90-0056141 90-0925280 90-1075675
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NATIONAL DEER ASSOCIATION GROUP RETURN

90-0201257

LAKE MURRAY BRANCH #1031 OF THE NATIONAL DEER ASSOCIATION	228 BANEBERRY LOOP - LEXINGTON, SC 29073	90-1087575
LAKELANDS BRANCH #1027 OF THE NATIONAL DEER ASSOCIATION	1219 PUCKETT TOWN RD. - BRADLEY, SC 29819	90-0841460
LITTLE RIVER BRANCH #1136 OF THE NATIONAL DEER ASSOCIATION	4412 FOREST LAKE DRIVE - TIFTON, GA 31794	90-1509022
LONE STAR BRANCH #1413 OF THE NATIONAL DEER ASSOCIATION	419 MEADOWVIEW CIRCLE - LONGVIEW, TX 75604	90-0493904
LONG ISLAND BRANCH #2325 OF THE NATIONAL DEER ASSOCIATION	6 WINDOVER LANE - CORAM, NY 11727	90-1129545
LONGHORN BRANCH #1418 OF THE NATIONAL DEER ASSOCIATION	1500 W PINECREST DR - MARSHALL, TX 75670	90-1255000
LOUISIANA STATE CHAPTER #2901 OF THE NATIONAL DEER ASSOCIATION	4777 W NICK CLAIRE - IOWA, LA 70647	90-0291876
LOWCOUNTRY BRANCH #1006 OF THE NATIONAL DEER ASSOCIATION	10 CRAVEN AVE - CHARLESTON, SC 29407	90-0056120
MACKINAC BRANCH # 2026 OF THE NATIONAL DEER ASSOCIATION	9587 W EASTON HWY - GRAND LEDGE, MI 48837	90-0493899
MAGNOLIA STATE BRANCH #2607 OF THE NATIONAL DEER ASSOCIATION	P.O. BOX 3727 - MERIDAN, MS 39303	90-0395205
MARYLAND STATE CHAPTER #3001 OF THE NATIONAL DEER ASSOCIATION	1315 BACHMAN VALLEY RD - WESTMINSTER, MD 21158	90-0283985
MASON-DIXON BRANCH #2210 OF THE NATIONAL DEER ASSOCIATION	502 W. SIDDONSBURG RD - DILLSBURG, PA 17019	90-0201271
MICHIGAN STATE CHAPTER #2001 OF THE NATIONAL DEER ASSOCIATION	5553 SCALLEY LAKE RD NE - BELDING, MI 48809	90-0457021
MID IOWA BRANCH #4306 OF THE NATIONAL DEER ASSOCIATION	10675 NW 114TH AVENUE - GRANGER, IA 50109	90-0309515
MID-CAROLINA BRANCH #1018 OF THE NATIONAL DEER ASSOCIATION	3324 WESSINGER RD - CHAPIN, SC 29036	90-0427785
MIDLANDS BRANCH #1005 OF THE NATIONAL DEER ASSOCIATION	301 TAMWOOD CIRCLE - CAYCE, SC 29033	90-0183489
MID-OHIO VALLEY# 3508 OF THE NATIONAL DEER ASSOCIATION	79 GLOVER RD - PARKERSBURG, WV 26101	90-1244354
MINNESOTA STATE CHAPTER #3301 OF THE NATIONAL DEER ASSOCIATION	13908 BIRCHWOOD AVENUE - ROSEMOUNT, MN 55068	90-0627275
MISSOURI STATE CHAPTER #2501 OF THE NATIONAL DEER ASSOCIATION	9012 VILLARIDGE CT UNIT C - SAINT LOUIS, MO 63123	90-0357662
MONTCALM COUNTY BRANCH #2007 OF THE NATIONAL DEER ASSOCIATION	112 GRANT STREET - SHERIDAN, MI 48834	90-0056131
MOUNTAIN MARYLAND BRANCH #3007 OF THE NATIONAL DEER ASSOCIATION	1951 NORTH GLADE ROAD - SWANTON, MD 21561	90-0573164
MOUNTAINEER BRANCH #3505 OF THE NATIONAL DEER ASSOCIATION	117 MICHAEL DEVELOPEMENT RD - FAIRMONT, WV 26554-8637	90-1043614
N. CENTRAL PENNSYLVANIA BRANCH #2204 OF THE NATIONAL DEER ASSOCIATION	434 LOWER BARBOURS RD. - WILLIAMSPORT, PA 17701	90-0056125
N.C. PIEDMONT BRANCH #1231 OF THE NATIONAL DEER ASSOCIATION	1840 ALTAMAHAW UNION RIDGE RD. - BURLINGTON, NC 27217	35-2543654



NATIONAL DEER ASSOCIATION GROUP RETURN

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NANTAHALA BRANCH #1235 OF THE NATIONAL DEER ASSOCIATION	16 BUTTONWOOD DRIVE - FRANKLIN, NC 28734	90-1260637
NATIVE PRAIRIE WHITETAILS # 4604 OF THE NATIONAL DEER ASSOCIATION	44945 288TH STREET - VIBORG, SD 57070	90-1190281
NESHOBA BRANCH# 2618 OF THE NATIONAL DEER ASSOCIATION	428 CROCKETT AVENUE - PHILADELPHIA, MS 39350	90-1136890
NORTH CAROLINA SAC - PRESIDENT OF THE NATIONAL DEER ASSOCIATION	36 SENTINEL CT. - SMITHFIELD, NC 27577	90-0411054
NORTH EAST INDIANA #3208 OF THE NATIONAL DEER ASSOCIATION	821 CARIBE BLVD - FORT WAYNE, IN 46815	61-1789839
NORTH MOUNTAIN BRANCH #2209 OF THE NATIONAL DEER ASSOCIATION	146 MAPLE TREE RD - DALLAS, PA 18612	90-0183488
NORTH TEXAS BRANCH #1415 OF THE NATIONAL DEER ASSOCIATION	1812 LEXINGTON AVE - ALLEN, TX 75013-5531	90-1118833
NORTHEAST LOUISIANA BAYOU BRANCH #2916 OF THE NATIONAL DEER ASSOCIATION	483 COOPER RD - DELHI, LA 71232	90-0627272
NORTHEAST MICHIGAN BRANCH #2016 OF THE NATIONAL DEER ASSOCIATION	2021 EAST BOBICK TRAIL - LINCOLN, MI 48742	80-0127556
NORTHERN FINGER LAKES BRANCH #2329 OF THE NATIONAL DEER ASSOCIATION	14 MADISON STREET - LYONS, NY 14489	90-1253540
NORTHERN JACK PINE #2030 OF THE NATIONAL DEER ASSOCIATION	4870 SCENIC HILLS DRIVE - WEST BRANCH, MI 48661	90-0795401
NORTHERN KETTLE MORaine BRANCH #1830 OF THE NATIONAL DEER ASSOCIATION	N4670 MINK ROAD - EDEN, WI 53019	32-0494809
NORTHERN KY TRI-STATE BRANCH # 3117 OF THE NATIONAL DEER ASSOCIATION	14128 PLUM CREEK RD - BUTLER, KY 41006-8391	90-1066612
NORTHWEST MICHIGAN #2021 OF THE NATIONAL DEER ASSOCIATION	2405 W BURDICKVILLE RD. - MAPLE CITY, MI 49664	90-0339185
NORTHWEST WISCONSIN BRANCH #1832 OF THE NATIONAL DEER ASSOCIATION	632 PINE STREET - PRESCOTT, WI 59021	90-1142070
NOVA BRANCH BRANCH #1931 OF THE NATIONAL DEER ASSOCIATION	6961 FAIRFAX DR - ARLINGTON, VA 22213	90-1142071
OZARK HIGHLANDS # 2519 OF THE NATIONAL DEER ASSOCIATION	107 NORTH CARLISLE DR - NIXA, MO 65714	90-1185255
OZARK MOUNTAIN MARK TWAIN BRANCH #2523 OF THE NATIONAL DEER ASSOCIATION	8002 STATE HIGHWAY 14 - E SPARTA, MO 65753	90-1898512
PA NATIONAL PIKE BRANCH #2223 OF THE NATIONAL DEER ASSOCIATION	1501 JONES ST - MONESSEN, PA 15062	90-0745919
PANHANDLE BRANCH #2413 OF THE NATIONAL DEER ASSOCIATION	7112 MAXWELL COURT - PANAMA CITY, FL 32404	90-1185260
PANOLA COUNTY BRANCH #1410 OF THE NATIONAL DEER ASSOCIATION	369 CR 304 - CARTHAGE, TX 75633	90-0419245
PEACH STATE BRANCH # 1131 OF THE NATIONAL DEER ASSOCIATION	2897 N. DRUID HILLS RD. #138 - ATLANTA, GA 30329	90-1185256
PEARL RIVER BRANCH# 2617 OF THE NATIONAL DEER ASSOCIATION	1620 HWY 587 - FOXWORTH, MS 39483	90-1125621

NATIONAL DEER ASSOCIATION GROUP RETURN

90-0201257

PENNSYLVANIA SAC - #2201 OF THE NATIONAL DEER ASSOCIATION	502 W. SIDDONSBURG RD - DILLSBURG, PA 17019	80-0132723
PEORIA AREA BRANCH #3918 OF THE NATIONAL DEER ASSOCIATION	5020 W BRADFORD WOODS CIRCLE #P - PEORIA, IL 61615	90-1897356
PIEDMONT BRANCH #1028 OF THE NATIONAL DEER ASSOCIATION	2640 HIGHWAY 56 - PAULINE, SC 29374	90-0863330
PINE BELT BRANCH # 2619 OF THE NATIONAL DEER ASSOCIATION	11 PLEASANT VALLEY DRIVE - PETAL, MS 39465	35-2584895
POST OAK # 1512 OF THE NATIONAL DEER ASSOCIATION	6 TURKEY CREEK RD - MATHEWS, AL 36052	38-4002555
PRAIRIE HIGHLANDS BRANCH #3310 OF THE NATIONAL DEER ASSOCIATION	476 221ST STREET - RUTHTON, MN 56170	90-0730383
PRAIRIE TO WOODS WHITETAILS BRANCH #3306 OF THE NATIONAL DEER ASSOCIATION	20400 OAK TREE RD. - MILTONA, MN 56354	90-0357663
RED RIVER BRANCH #2906 OF THE NATIONAL DEER ASSOCIATION	9416 PRESTONWOOD DR. - SHEREVEPORT, LA 71115	90-0283995
RIVER CITY BRANCH #1926 OF THE NATIONAL DEER ASSOCIATION	1805 GILES BRIDGE RD - POWHATAN, VA 23139	90-0627260
RIVER VALLEY WHITETAILS BRANCH #3314 OF THE NATIONAL DEER ASSOCIATION	42455 190TH STREET - MORGAN, MN 56266	35-2560570
ROCKINGHAM BRANCH #1905 OF THE NATIONAL DEER ASSOCIATION	114 HARRISTON RD. - GROTTUES, VA 24441	90-0201276
RUM RIVER BRANCH #3303 OF THE NATIONAL DEER ASSOCIATION	350 COUNTY RD 6 NE - STANCHFIELD, MN 55080	90-0183463
SANDHILL BRANCH #1034 OF THE NATIONAL DEER ASSOCIATION	3390 EAST JACKSON RD. - CHESTERFIELD, SC 29709	90-1129549
SANDY RUN CREEK BRANCH #1225 OF THE NATIONAL DEER ASSOCIATION	1486 CANE CREEK MOUNTAIN RD - BOSTIC, NC 28018	90-1040211
SEAWAY VALLEY BRANCH #2308 OF THE NATIONAL DEER ASSOCIATION	714 CHUB LAKE ROAD - GOUVERNEUR, NY 13642	80-0127553
SEMO TRAIL OF TEARS BRANCH #2514 OF THE NATIONAL DEER ASSOCIATION	588 ASTILBE LN - JACKSON, MO 63755	90-0493901
SHIAWASSEE RIVER BRANCH #2025 OF THE NATIONAL DEER ASSOCIATION	8580 E LEHRING RD - DURAND, MI 48429	90-0411057
SOUTH EAST TEXAS BRANCH #1414 OF THE NATIONAL DEER ASSOCIATION	P.O. BOX 1266 - HUNTINGTON, TX 75949	90-0819315
SOUTH LOUISIANA BRANCH #2903 OF THE NATIONAL DEER ASSOCIATION	3370 POYDRAS BAYOU RD - PORT ALLEN, LA 70767	90-0056137
SOUTHEAST MICHIGAN BRANCH #2019 OF THE NATIONAL DEER ASSOCIATION	48066 CHESTERFIELD DR. S - CANTON, MI 48187	80-0127559
SOUTHEAST MISSOURI BRANCH #2506 OF THE NATIONAL DEER ASSOCIATION	1113 ADAMS STREET - BONNE TERRE, MO 63628	90-0268709
SOUTHEAST PENNSYLVANIA BRANCH #2202 OF THE NATIONAL DEER ASSOCIATION	205 N RIDGE RD - REINHOLDS, PA 17569	90-0056123
SOUTHEASTERN TENNESSEE BRANCH #1315 OF THE NATIONAL DEER ASSOCIATION	711 CHERRY ST - CHATTANOOGA, TN 37402	90-0852576

NATIONAL DEER ASSOCIATION GROUP RETURN

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SOUTHERN CHAUTAUQUA BRANCH #2320 OF THE NATIONAL DEER ASSOCIATION	2727 RIVERSIDE ROAD - JAMESTOWN, NY 14701	90-1113766
SOUTHERN INDIANA #3209 OF THE NATIONAL DEER ASSOCIATION	5250 NEEDMORE LANE SE - ELIZABETH, IN 47117	90-1259174
SOUTHERN NEW JERSEY BRANCH #1601 OF THE NATIONAL DEER ASSOCIATION	3291 CEDARVILLE RD. - MILLVILLE, NJ 08332	90-0221659
SOUTHWEST BRANCH #2034 OF THE NATIONAL DEER ASSOCIATION	43315 CR 390 - BLOOMINGDALE, MI 49026	90-1078797
SOUTHWEST LOUISIANA BRANCH #2915 OF THE NATIONAL DEER ASSOCIATION	4777 W NICK CLAIRE LN - IOWA, LA 70647	90-1074214
SOUTHWEST MISSISSIPPI BRANCH #2610 OF THE NATIONAL DEER ASSOCIATION	215 S. RAILROAD AVENUE - BROOKHAVEN, MS 39601	90-0679345
SOUTHWESTERN WISCONSIN BRANCH #1821 OF THE NATIONAL DEER ASSOCIATION	25247 DRY BONE ROAD - CUBA CITY, WI 53807	90-0254373
SOWEGA BRANCH # 1130 OF THE NATIONAL DEER ASSOCIATION	1001 E WALCOTT ST - THOMASVILLE, GA 31792	90-1139941
STEEL CITY BRANCH# 2228 OF THE NATIONAL DEER ASSOCIATION	243 ORCHARD ST - BAIRDFORD, PA 15006	90-1186878
SWAMP BUCK BRANCH #2417 OF THE NATIONAL DEER ASSOCIATION	8873 SW 14TH RD. - GAINESVILLE, FL 32607	90-1256961
TALLAHASSEE FL BRANCH #2418 OF THE NATIONAL DEER ASSOCIATION	7241 COVEY TRACE - TALLAHASSEE, FL 32309	90-1764104
THE COUNTY BRANCH OF #5105 OF THE NATIONAL DEER ASSOCIATION	134 MAIN STREET - FAIRFIELD, ME 04742	32-0515885
THREE RIVERS BRANCH #1831 OF THE NATIONAL DEER ASSOCIATION	1325 W WISCONSIN ST - PORTAGE, WI 53901	38-4024203
THUMB AREA BRANCH #2003 OF THE NATIONAL DEER ASSOCIATION	1163 FAIRVIEW - LAPEER, MI 48446	90-0056136
TIMBER BELT BRANCH #1516 OF THE NATIONAL DEER ASSOCIATION	109 BUENA VISTA DR - JACKSON, AL 36545	90-1185257
TIP OF THE MITT BRANCH #2029 OF THE NATIONAL DEER ASSOCIATION	2800 WEST STUTSMANVILLE RD. - HARBOR SPRINGS, MI 49740	90-0753668
TRIANGLE BRANCH #1236 OF THE NATIONAL DEER ASSOCIATION	36 SENTINEL CT. - SMITHFIELD, NC 27577	90-1079385
TWIN CREEK BRANCH #3711 OF THE NATIONAL DEER ASSOCIATION	2238 BANTAS CREEK RD - EATON, OH 45320	90-0795388
TWIN TIERS BRANCH #2327 OF THE NATIONAL DEER ASSOCIATION	17 FAIRWAY LANE - HORSEHEADS, NY 14845	90-1187831
UGA BRANCH# 1128 OF THE NATIONAL DEER ASSOCIATION	600 N THOMAS ST APT 2607-A - ATHENS, GA 30601	90-1076780
UNI. OF MONTEVALLO OUTDOOR SCHOLARS#1518 OF THE NATIONAL DEER ASSOCIATION	6640 COUNTY RD 49 - CLANTON, AL 35045	90-1253541
UPPER CUMBERLAND #1313 OF THE NATIONAL DEER ASSOCIATION	4024 JUANITA DR - COOKEVILLE, TN 38506-3536	90-0925280
UPPER GENESEE RIVER BRANCH #2330 OF THE NATIONAL DEER ASSOCIATION	35 HIGHLAND HEIGHTS DR. - WELLSVILLE, NY 14895	90-1503424
UPPER HUDSON RIVER VALLEY BRANCH #2306 OF THE NATIONAL DEER ASSOCIATION	177 EYCLESHYMER RD. - JOHNSONVILLE, NY 12094	80-0127552

NATIONAL DEER ASSOCIATION GROUP RETURN

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VIRGINIA STATE CHAPTER #1901 OF THE NATIONAL DEER ASSOCIATION	1805 GILES BRIDGE RD - POWHATAN, VA 23139	90-0283348
VIRGINIA TECH BRANCH #1930 OF THE NATIONAL DEER ASSOCIATION	P.O. BOX 10816 - BLACKBURG, VA 24062	90-1074762
WEEVIL CREEK BRANCH #1514 OF THE NATIONAL DEER ASSOCIATION	403 HOLLY HILL ROAD - ENTERPRISE, AL 36330	38-4040463
WEST CENTRAL MICHIGAN #2023 OF THE NATIONAL DEER ASSOCIATION	8401 VERGENNES - ADA, MI 49301	90-0374630
WEST CENTRAL PENNSYLVANIA BRANCH #2231 OF THE NATIONAL DEER ASSOCIATION	152 PLUMCREEK RD. - SHELOCTA, PA 15774	90-1896498
WEST KENTUCKY BRANCH # 3116 OF THE NATIONAL DEER ASSOCIATION	8139 STATE ROUTE 121 - SOUTH MURRAY, KY 42071	90-1039465
WEST SHORE BRANCH #2004 OF THE NATIONAL DEER ASSOCIATION	7260 N. US 31 - FREESOIL, MI 49411	90-0056134
WEST TENNESSEE # 1316 OF THE NATIONAL DEER ASSOCIATION	29 GREENSBOROUGH DR - JACKSON, TN 38305	90-1134920
WEST-CENTRAL BRANCH # 3906 OF THE NATIONAL DEER ASSOCIATION	576 300TH STREET - NORTH HENDERSON, IL 61466	90-0419257
WESTERN NEW ENGLAND #3604 OF THE NATIONAL DEER ASSOCIATION	62 MOUNTAIN LANE - BALTIMORE, VT 05143	90-1655081
WESTERN RESERVE BRANCH #3713 OF THE NATIONAL DEER ASSOCIATION	9601 AVON LAKE ROAD - LODI, OH 44254	90-0908921
WHITE RIVER BRANCH #3203 OF THE NATIONAL DEER ASSOCIATION	20899 HIGHWAY 5 - MOUNTAIN VIEW, AR 72560	90-0298370
WHITESTORE BRANCH #1217 OF THE NATIONAL DEER ASSOCIATION	6924 SHELF RD - MARSHVILLE, NC 28103	90-0357668
WISCONSIN STATE CHAPTER#1801 OF THE NATIONAL DEER ASSOCIATION	PO BOX 160 - BOGART, GA 30622	90-0298046
WOLF RIVER #1310 OF THE NATIONAL DEER ASSOCIATION	5080 FOREST HILL IRENE RD - MEMPHIS, TN 38125	90-0802367
WV VA BRANCH #1932 OF THE NATIONAL DEER ASSOCIATION	101 REYNOLDS AVENUE - BLUEFIELD, VA 24605	90-1393252



**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		FUNDRAISING EVENT		NONE	
	Revenue	(event type)	(event type)	(total number)	
1	Gross receipts .....	608,871.			608,871.
2	Less: Contributions .....	487,097.			487,097.
3	Gross income (line 1 minus line 2) .....	121,774.			121,774.
<b>Direct Expenses</b>					
4	Cash prizes .....				
5	Noncash prizes .....				
6	Rent/facility costs .....	29,514.			29,514.
7	Food and beverages .....	101,880.			101,880.
8	Entertainment .....				
9	Other direct expenses .....				
10	Direct expense summary. Add lines 4 through 9 in column (d) .....				131,394.
11	Net income summary. Subtract line 10 from line 3, column (d) .....				-9,620.

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
1	Gross revenue .....			328,260.	328,260.
<b>Direct Expenses</b>					
2	Cash prizes .....				
3	Noncash prizes .....				
4	Rent/facility costs .....				
5	Other direct expenses .....			494,871.	494,871.
6	Volunteer labor .....	Yes _____ % No	Yes _____ % No	<input checked="" type="checkbox"/> Yes 100 % No	
7	Direct expense summary. Add lines 2 through 5 in column (d) .....				494,871.
8	Net gaming income summary. Subtract line 7 from line 1, column (d) .....				<166,611.>

**SEE PART IV FOR FULL LIST OF STATES**

9 Enter the state(s) in which the organization conducts gaming activities: GA, SC, FL, AL, MS, TN, NC, OK, NY, VA, MA, ME  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes  No  
 b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers? ..... Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ..... Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a	The organization's facility	13a	.00	%
b	An outside facility	13b	100.00	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name NICHOLAS PINNIZZOTTO, CEO

Address P.O. BOX 160 - BOGART , GA 30622

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ..... Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name \_\_\_\_\_

Address \_\_\_\_\_

16 Gaming manager information:

Name NICHOLAS PINNIZZOTTO, CEO

Gaming manager compensation \$ 13,501.

Description of services provided \_\_\_\_\_

Director/officer                      Employee                      Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ..... Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART III, LINE 9, LIST OF STATES WITH GAMING ACTIVITIES:

GA, SC, FL, AL, MS, TN, NC, OK, NY, VA, MA, ME, NH, PA, IN, MI, OH, MN, IA, ND, SD, LA, WV, KY

NH, RI





**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
**Attach to Form 990.**  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization **NATIONAL DEER ASSOCIATION GROUP RETURN** Employer identification number **90-0201257**

**Part I General Information on Grants and Assistance**

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

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
NATIONAL DEER ASSOCIATION PO BOX 160 BOGART , GA 30622	57-0941892	501(C)(3)	56,861.	0.			SPONSORING YOUTH TO HUNT
NATIONAL DEER ASSOCIATION PO BOX 160 BOGART , GA 30622	57-0941892	501(C)(3)	257,409.	0.			OPERATIONS

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

**3** Enter total number of other organizations listed in the line 1 table 0.

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

Schedule I (Form 990) 2022



**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees  
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

Open to Public  
Inspection

Name of the organization

**NATIONAL DEER ASSOCIATION GROUP RETURN**

Employer identification number

**90-0201257**

**Part I Questions Regarding Compensation**

	Yes	No								
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.										
<table border="0"> <tr> <td>First-class or charter travel</td> <td>Housing allowance or residence for personal use</td> </tr> <tr> <td>Travel for companions</td> <td>Payments for business use of personal residence</td> </tr> <tr> <td>Tax indemnification and gross-up payments</td> <td>Health or social club dues or initiation fees</td> </tr> <tr> <td>Discretionary spending account</td> <td>Personal services (such as maid, chauffeur, chef)</td> </tr> </table>	First-class or charter travel	Housing allowance or residence for personal use	Travel for companions	Payments for business use of personal residence	Tax indemnification and gross-up payments	Health or social club dues or initiation fees	Discretionary spending account	Personal services (such as maid, chauffeur, chef)		
First-class or charter travel	Housing allowance or residence for personal use									
Travel for companions	Payments for business use of personal residence									
Tax indemnification and gross-up payments	Health or social club dues or initiation fees									
Discretionary spending account	Personal services (such as maid, chauffeur, chef)									
<b>b</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 .....	<b>1b</b>									
<b>2</b> 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? .....	<b>2</b>									
<b>3</b> Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.										
<table border="0"> <tr> <td>Compensation committee</td> <td>Written employment contract</td> </tr> <tr> <td>Independent compensation consultant</td> <td>Compensation survey or study</td> </tr> <tr> <td>Form 990 of other organizations</td> <td>Approval by the board or compensation committee</td> </tr> </table>	Compensation committee	Written employment contract	Independent compensation consultant	Compensation survey or study	Form 990 of other organizations	Approval by the board or compensation committee				
Compensation committee	Written employment contract									
Independent compensation consultant	Compensation survey or study									
Form 990 of other organizations	Approval by the board or compensation committee									
<b>4</b> 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:										
<b>a</b> Receive a severance payment or change-of-control payment? .....	<b>4a</b>	<b>X</b>								
<b>b</b> Participate in or receive payment from a supplemental nonqualified retirement plan? .....	<b>4b</b>	<b>X</b>								
<b>c</b> Participate in or receive payment from an equity-based compensation arrangement? .....	<b>4c</b>	<b>X</b>								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
<b>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>										
<b>5</b> 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:										
<b>a</b> The organization? .....	<b>5a</b>	<b>X</b>								
<b>b</b> Any related organization? .....	<b>5b</b>	<b>X</b>								
If "Yes" on line 5a or 5b, describe in Part III.										
<b>6</b> 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:										
<b>a</b> The organization? .....	<b>6a</b>	<b>X</b>								
<b>b</b> Any related organization? .....	<b>6b</b>	<b>X</b>								
If "Yes" on line 6a or 6b, describe in Part III.										
<b>7</b> 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 .....	<b>7</b>	<b>X</b>								
<b>8</b> 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 .....	<b>8</b>	<b>X</b>								
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....	<b>9</b>									

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

Open to Public  
Inspection

Name of the organization

NATIONAL DEER ASSOCIATION GROUP RETURN

Employer identification number

90-0201257

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WITH MEMBERS IN ALL 50 STATES AND CANADA, THE NATIONAL DEER ASSOCIATION(NDA) WORKS CLOSELY WITH HUNTERS, LANDOWNERS, WILDLIFE AGENCIES AND OTHER CONSERVATIONISTS TO IMPROVE DEER HERDS AND HUNTER SATISFACTION ON MILLIONS OF ACRES OF PUBLIC AND PRIVATE LAND. THE GOALS AND ACTIVITIES OF NDA ARE ACCOMPLISHED WITH ITS STAFF AND EXTENSIVE VOLUNTEER NETWORK. GIVEN NDA'S HISTORY OF USING SCIENCE AND HUNTER ETHICS TO GUIDE SOUND DEER MANAGEMENT DECISIONS, IT IS WIDELY CONSIDERED THE MOST RESPECTED AND INFLUENTIAL DEER CONSERVATION AGENCY IN NORTH AMERICA.

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

IN 2022, NDA HAD A SIGNIFICANT IMPACT ON POLICY THAT IMPACTS DEER, HUNTING, AND CONSERVATION BY SENDING 60 ACTION ALERTS, AUTHORIZING, OR SIGNING 95 LETTERS OF SUPPORT OR OPPOSITION, AND ENCOURAGING MORE THAN 3,000 LETTERS FROM OUR CONSTITUENTS. NDA ADDRESSED LANDSCAPE-LEVEL ACCESS AND FOREST HEALTH ISSUES THROUGH THE PUBLIC LANDS INITIATIVE BY HELPING TO IMPROVE 316,218 ACRES OF PUBLIC LAND IN SIX STATES AT A TOTAL VALUE OF \$2,164,206. NDA CONTINUED TO PROVIDE SOME OF THE BEST DEER AND HABITAT EDUCATIONAL CONTENT IN THE WORLD BY PUBLISHING MORE THAN 100 COMBINED ARTICLES AND VIDEOS ACROSS OUR VARIOUS PLATFORMS. MORE THAN 6 MILLION PEOPLE WERE REACHED THROUGH NDA'S SOCIAL MEDIA CHANNELS ALONE. NDA HELD 54 FIELD TO FORK EVENTS ACROSS 19 STATES TO INTRODUCE NEW PEOPLE TO HUNTING AS PART OF OUR R3 INITIATIVES WHILE

Name of the organization NATIONAL DEER ASSOCIATION GROUP RETURN	Employer identification number 90-0201257
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ALSO GRADUATING 300 NEW DEER STEWARD PARTICIPANTS AT VARIOUS LEVELS.  
 NDA FINISHED ANOTHER STRONG FINANCIAL YEAR HELPED BY SECURING A RECORD  
 NUMBER OF CORPORATE SPONSORS AND CONDUCTING THE ORGANIZATION'S FIRST  
 EVER GIVING DAY.

FORM 990, PART VI, SECTION A, LINE 6:  
 THE ORGANIZATION WAS ORGANIZED WITH MEMBERS. THERE WERE 230 BRANCHES IN  
 2022.

FORM 990, PART VI, SECTION B, LINE 11B:  
 THE CEO REVIEWS THE FORM 990 WITH FINANCIAL PERSONNEL, THE BOARD EXECUTIVE  
 COMMITTEE AND THE RETURN PREPARER.

FORM 990, PART VI, SECTION B, LINE 12C:  
 DISCUSSIONS AT REGULARLY SCHEDULED BOARD MEETINGS AND THROUGH WRITTEN  
 CONFLICT OF INTEREST STATEMENTS SIGNED BY BOARD MEMBERS.

FORM 990, PART VI, SECTION C, LINE 19:  
 VIA WWW.DEERASSOCIATION.COM AND UPON REQUEST.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public Inspection**

Name of the organization **NATIONAL DEER ASSOCIATION GROUP RETURN** Employer identification number **90-0201257**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
NATIONAL DEER ASSOCIATION - 57-0941892 PO BOX 160 BOGART , GA 30622	WILDLIFE CONSERVATION	GEORGIA	501(C)(3)	LINE 10		X	



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

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

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

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

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

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	X	
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	X	
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NATIONAL DEER ASSOCIATION, INC.	B	319,570.	
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

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

