

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2005

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements

Department of the Treasury Internal Revenue Service

A For the 2005 calendar year, or tax year beginning 07-01-2005 and ending 06-30-2006

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

C Name of organization: NATIONAL WILDLIFE REFUGE ASSOCIATION. Address: 1901 PENNSYLVANIA AVENUE ROOM/SUITE 407 WASHINGTON, DC 20006

D Employer identification number: 23-7447365. E Telephone number: (202) 333-9075. F Accounting method: Accrual

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? H(b) If "Yes" enter number of affiliates. H(c) Are all affiliates included? H(d) Is this a separate return filed by an organization covered by a group ruling? I Group Exemption Number. M Check if the organization is not required to attach Sch B

G Web site: WWW.REFUGENET.ORG

J Organization type (check only one): 501(c)(3)

K Check here if the organization's gross receipts are normally not more than \$25,000

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 456,227

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions (329,204), Program service revenue (29,746), Net gain or loss (8d), Total revenue (456,227), Total expenses (614,126), and Net assets at end of year (286,849).

**Part II Statement of Functional Expenses**

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
<b>22</b>	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22</b>				
<b>23</b>	Specific assistance to individuals (attach schedule)	<b>23</b>				
<b>24</b>	Benefits paid to or for members (attach schedule)	<b>24</b>				
<b>25</b>	Compensation of officers, directors, etc . . . . .	<b>25</b>	110,251	97,351	6,946	5,954
<b>26</b>	Other salaries and wages . . . . .	<b>26</b>	165,521	145,173	17,934	2,414
<b>27</b>	Pension plan contributions . . . . .	<b>27</b>	10,531	9,154	1,122	255
<b>28</b>	Other employee benefits . . . . .	<b>28</b>	16,540	14,377	1,762	401
<b>29</b>	Payroll taxes . . . . .	<b>29</b>	21,517	18,703	2,292	522
<b>30</b>	Professional fundraising fees . . . . .	<b>30</b>				
<b>31</b>	Accounting fees . . . . .	<b>31</b>	7,088	6,161	755	172
<b>32</b>	Legal fees . . . . .	<b>32</b>				
<b>33</b>	Supplies . . . . .	<b>33</b>	7,282	6,333	773	176
<b>34</b>	Telephone . . . . .	<b>34</b>	10,655	9,583	873	199
<b>35</b>	Postage and shipping . . . . .	<b>35</b>	4,875	4,335	330	210
<b>36</b>	Occupancy . . . . .	<b>36</b>	27,374	23,798	2,912	664
<b>37</b>	Equipment rental and maintenance . . . . .	<b>37</b>	4,367	3,820	446	101
<b>38</b>	Printing and publications . . . . .	<b>38</b>	10,435	10,420		15
<b>39</b>	Travel . . . . .	<b>39</b>	22,970	21,984	32	954
<b>40</b>	Conferences, conventions, and meetings . . . . .	<b>40</b>	35,382	31,209	3,399	774
<b>41</b>	Interest . . . . .	<b>41</b>				
<b>42</b>	Depreciation, depletion, etc (attach schedule)	<b>42</b>	2,582	2,244	275	63
<b>43</b>	Other expenses not covered above (itemize)					
<b>a</b>	See Additional Data Table	<b>43a</b>				
<b>b</b>		<b>43b</b>				
<b>c</b>		<b>43c</b>				
<b>d</b>		<b>43d</b>				
<b>e</b>		<b>43e</b>				
<b>f</b>		<b>43f</b>				
<b>g</b>		<b>43g</b>				
<b>44</b>	<b>Total functional expenses.</b> Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	614,126	557,419	41,584	15,123

**Joint Costs.** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► REFUGE SYSTEM PROTECTION  All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
<b>a</b> STRENGTHEN REFUGE SYSTEM POLICY - WORK WITH NATIONAL AND LOCAL PARTNERS TO ADDRESS TOP REFUGE SYSTEM THREATS INCLUDING FUNDING SHORTFALLS, LOSS OF VITAL BUFFER HABITATS AND INFESTATION OF REFUGE HABITAT BY INVASIVE PLANTS AND ANIMALS. EDUCATE DECISION-MAKERS THROUGH POLICY INITIATIVES SUCH AS BEYOND THE BOUNDARIES, THAT EMPHASIZES THE IMPORTANCE OF LOOKING BEYOND REFUGE BOUNDARIES WITH PRIVATE LANDOWNERS, STATES AND OTHER FEDERAL AGENCIES IN AN EFFORT OF PROTECT THE INTEGRITY OF REFUGE WILDLIFE HABITAT. COMMENT AND PROVIDE GUIDANCE ON REFUGE COMPREHENSIVE CONSERVATION PLANS.  (Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	195,993
<b>b</b> BUILD A NATIONAL CONSTITUENCY FOR REFUGES - INCREASE THE NUMBER OF REFUGE FRIENDS GROUPS NATIONWIDE, PROVIDE TRAINING AND NETWORKING OPPORTUNITIES AND PROMOTE THE CONTINUED PROTECTION AND ENHANCEMENT OF THE NATIONAL WILDLIFE REFUGE SYSTEM. CONDUCTED FRIENDS WORKSHOP, ATTENDED BY 60 VOLUNTEERS REPRESENTING 30 GEOGRAPHICALLY DIVERSE GROUPS, WHERE PARTICIPANTS LEARNED ABOUT THREATS TO REFUGES AND CONSERVATION TOOLS FOR DEVELOPING PLANS TO PROTECT THEIR REFUGES. PROVIDED ADVOCACY AND MEDIA AND COMMUNICATIONS TRAINING TO 200 REFUGE FRIENDS AT REGIONAL WORKSHOPS. EXPANDED THE NUMBER OF NWRA FRIENDS GROUP AFFILIATES TO MORE THAN 100.  (Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	234,668
<b>c</b> PUBLIC EDUCATION OUTREACH - INCREASE PUBLIC UNDERSTANDING AND APPRECIATION OF NATIONAL WILDLIFE REFUGE SYSTEM THROUGH SEMI-ANNUAL MAGAZINE, MONTHLY ELECTRONIC NEWSLETTER, WEBSITE CONTENT AND UPDATES, AND NATIONAL WILDLIFE REFUGE SYSTEM PHOTO CONTEST. CONDUCT AWARDS PROGRAM RECOGNIZING EXEMPLARY REFUGE STAFF AND VOLUNTEERS.  (Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	126,758
<b>d</b> _____ _____ (Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . ►	557,419

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	<b>45</b> Cash—non-interest-bearing . . . . .	57,312	<b>45</b>	
	<b>46</b> Savings and temporary cash investments . . . . .	68,550	<b>46</b>	244,593
	<b>47a</b> Accounts receivable . . . . .	8,000		
	<b>b</b> Less allowance for doubtful accounts		262,898	<b>47c</b> 8,000
	<b>48a</b> Pledges receivable . . . . .			
	<b>b</b> Less allowance for doubtful accounts			<b>48c</b>
	<b>49</b> Grants receivable . . . . .	43,700	<b>49</b>	12,000
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>50</b>	
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .			
	<b>b</b> Less allowance for doubtful accounts			<b>51c</b>
	<b>52</b> Inventories for sale or use . . . . .	4,618	<b>52</b>	1,166
	<b>53</b> Prepaid expenses and deferred charges . . . . .	10,139	<b>53</b>	10,639
	<b>54</b> Investments—securities (attach schedule) <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	11,820	<b>54</b>	14,650
	<b>55a</b> Investments—land, buildings, and equipment basis . . . . .			
	<b>b</b> Less accumulated depreciation (attach schedule) . . . . .			<b>55c</b>
<b>56</b> Investments—other (attach schedule) . . . . .		<b>56</b>		
<b>57a</b> Land, buildings, and equipment basis	27,370			
<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	18,864	3,773	<b>57c</b> 8,506	
<b>58</b> Other assets (describe )	1,422	<b>58</b>	3,421	
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .	464,232	<b>59</b>	302,975	
Liabilities	<b>60</b> Accounts payable and accrued expenses . . . . .	19,484	<b>60</b>	16,126
	<b>61</b> Grants payable . . . . .		<b>61</b>	
	<b>62</b> Deferred revenue . . . . .		<b>62</b>	
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>63</b>	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .		<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .		<b>64b</b>	
	<b>65</b> Other liabilities (describe )		<b>65</b>	
<b>66 Total liabilities</b> Add lines 60 through 65 . . . . .	19,484	<b>66</b>	16,126	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	<b>67</b> Unrestricted . . . . .	422,248	<b>67</b>	222,849
	<b>68</b> Temporarily restricted . . . . .	22,500	<b>68</b>	64,000
	<b>69</b> Permanently restricted . . . . .		<b>69</b>	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>72</b>	
	<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) <b>must</b> equal line 19, column (B) <b>must</b> equal line 21) . . . . .	444,748	<b>73</b>	286,849
	<b>74 Total liabilities and net assets / fund balances</b> Add lines 66 and 73 . . . . .	464,232	<b>74</b>	302,975

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>a</b>	456,227
<b>b</b>	Amounts included on line <b>a</b> but not on line 12		
<b>1</b>	Net unrealized gains on investments . . . . .	<b>b1</b>	
<b>2</b>	Donated services and use of facilities . . . . .	<b>b2</b>	
<b>3</b>	Recoveries of prior year grants . . . . .	<b>b3</b>	
<b>4</b>	Other (specify) _____	<b>b4</b>	
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	456,227
<b>d</b>	Amounts included on line 12, but not on line <b>a</b>		
<b>1</b>	Investment expenses not included on line 6b . . . . .	<b>d1</b>	
<b>2</b>	Other (specify) _____	<b>d2</b>	
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	
<b>e</b>	<b>Total revenue</b> (line 12) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	456,227

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements . . . . .	<b>a</b>	614,126
<b>b</b>	Amounts included on line <b>a</b> but not on line 17		
<b>1</b>	Donated services and use of facilities . . . . .	<b>b1</b>	
<b>2</b>	Prior year adjustments reported on line 20 . . . . .	<b>b2</b>	
<b>3</b>	Losses reported on line 20 . . . . .	<b>b3</b>	
<b>4</b>	Other (specify) _____	<b>b4</b>	
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	614,126
<b>d</b>	Amounts included on line 17, but not on line <b>a</b> :		
<b>1</b>	Investment expenses not included on line 6b . . . . .	<b>d1</b>	
<b>2</b>	Other (specify) _____	<b>d2</b>	
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	
<b>e</b>	<b>Total expenses</b> (line 17) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	614,126

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Additional Data Table				



**Part VI Other Information** (continued)

	Yes	No
--	-----	----

<b>82a</b> Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	<b>82a</b>	Yes	
<b>b</b> If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)	<b>82b</b>		
<b>83a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?	<b>83a</b>	Yes	
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	<b>83b</b>	Yes	
<b>84a</b> Did the organization solicit any contributions or gifts that were not tax deductible?	<b>84a</b>	Yes	
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>84b</b>	Yes	
<b>85 501(c)(4), (5), or (6) organizations. a</b> Were substantially all dues nondeductible by members?	<b>85a</b>		
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes," was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year	<b>85b</b>		
<b>c</b> Dues assessments, and similar amounts from members	<b>85c</b>		
<b>d</b> Section 162(e) lobbying and political expenditures	<b>85d</b>		
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	<b>85e</b>		
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e)	<b>85f</b>		
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	<b>85g</b>		
<b>h</b> If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	<b>85h</b>		
<b>86 501(c)(7) orgs.</b> Enter <b>a</b> Initiation fees and capital contributions included on line 12	<b>86a</b>		
<b>b</b> Gross receipts, included on line 12, for public use of club facilities	<b>86b</b>		
<b>87 501(c)(12) orgs.</b> Enter <b>a</b> Gross income from members or shareholders	<b>87a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<b>87b</b>		
<b>88</b> At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	<b>88</b>		No
<b>89a 501(c)(3) organizations</b> Enter Amount of tax imposed on the organization during the year under section 4911 _____, section 4912 _____, section 4955 _____			
<b>b 501(c)(3) and 501(c)(4) orgs.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	<b>89b</b>		No
<b>c</b> Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
<b>d</b> Enter Amount of tax on line 89c, above, reimbursed by the organization			
<b>90a</b> List the states with which a copy of this return is filed. See Additional Data Table			
<b>b</b> Number of employees employed in the pay period that includes March 12, 2005 (See instructions)	<b>90b</b>		4
<b>91a</b> The books are in care of <u>THE ORGANIZATION</u> Telephone no <u>(202) 333-9075</u> <u>1901 PENNSYLVANIA AVENUE</u> Located at <u>WASHINGTON, DC</u> ZIP + 4 <u>20006</u>			
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>91b</b>	Yes No	No
If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts			
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the United States?	<b>91c</b>		No
If "Yes," enter the name of the foreign country _____			
<b>92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	<b>92</b>		

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments . . . . .					29,746
<b>95</b> Interest on savings and temporary cash investments			14	5,238	
<b>96</b> Dividends and interest from securities . . . . .					
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property . . . . .					
<b>b</b> non debt-financed property . . . . .					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events . . . . .					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue <b>a</b> <u>ROYALTY</u>			15	10,000	
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .				15,238	29,746
<b>105 Total</b> (add line 104, columns (B), (D), and (E)) . . . . .					44,984

**Note:** Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
94	THE PROCEEDS FROM THESE ACTIVITIES PROVIDE THE SEMIANNUAL NEWSLETTER AND WEBSITE OUR MEMBERS USE TO KEEP INFORMED ABOUT THE ISSUES AFFECTING THE REFUGE SYSTEM AND HOW THEY CAN ASSIST

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**NOTE:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

**Please Sign Here**

\*\*\*\*\*  
Signature of officer \_\_\_\_\_ Date 2006-11-02

EVAN HIRSCH PRESIDENT  
Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature: THERESA HUTCHINSON Date: 2006-11-13 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: COATES & HUTCHINSON PC  
P O BOX 561  
ODENTON, MD 21113

Preparer's SSN or PTIN (See Gen Inst W) \_\_\_\_\_  
EIN: \_\_\_\_\_  
Phone no: (410) 672-6339

**SCHEDULE A  
(Form 990 or  
990EZ)**

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information—(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2005**

Department of the  
Treasury  
Internal Revenue  
Service

Name of the organization  
NATIONAL WILDLIFE REFUGE  
ASSOCIATION

**Employer identification number**

23-7447365

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
DESIREE SORENSON GROVES 1901 PENNSYLVANIA AVENUE SUITE 407 WASHINGTON, DC 20006	DIR OF GRASSROOTS 40 00	56,666	2,833	0
Total number of other employees paid over \$50,000 ▶				

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶		

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page X for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services ▶		

<b>Part III Statements About Activities</b> (See page 2 of the instructions.)		Yes	No
<b>1</b>	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>0</u> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		No
<b>2</b>	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
<b>a</b>	Sale, exchange, or leasing property?	<b>2a</b>	No
<b>b</b>	Lending of money or other extension of credit?	<b>2b</b>	No
<b>c</b>	Furnishing of goods, services, or facilities?	<b>2c</b>	No
<b>d</b>	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<b>2d</b>	Yes
<b>e</b>	Transfer of any part of its income or assets?	<b>2e</b>	No
<b>3a</b>	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	<b>3a</b>	No
<b>b</b>	Do you have a section 403(b) annuity plan for your employees?	<b>3b</b>	Yes
<b>c</b>	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	<b>3c</b>	No
<b>4a</b>	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	<b>4a</b>	No
<b>b</b>	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>4b</b>	No

<b>Part IV Reason for Non-Private Foundation Status</b> (See pages 3 through 6 of the instructions.)									
The organization is not a private foundation because it is (Please check only <b>ONE</b> applicable box.)									
<b>5</b>	<input type="checkbox"/> A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)								
<b>6</b>	<input type="checkbox"/> A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)								
<b>7</b>	<input type="checkbox"/> A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).								
<b>8</b>	<input type="checkbox"/> A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).								
<b>9</b>	<input type="checkbox"/> A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). <b>Enter the hospital's name, city, and state ▶</b> _____								
<b>10</b>	<input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the <b>Support Schedule</b> in Part IV-A.)								
<b>11a</b>	<input checked="" type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)								
<b>11b</b>	<input type="checkbox"/> A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)								
<b>12</b>	<input type="checkbox"/> An organization that normally receives <b>(1) more than 33 1/3%</b> of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and <b>(2) no more than 33 1/3%</b> of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)								
<b>13</b>	<input type="checkbox"/> An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in <b>(1)</b> lines 5 through 12 above, or <b>(2)</b> sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization ▶ <input type="checkbox"/> Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> Type 3								
Provide the following information about the supported organizations (see page 5 of the instructions.)									
<table border="1"> <thead> <tr> <th>(a) Name(s) of supported organization(s)</th> <th>(b) Line number from above</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>		(a) Name(s) of supported organization(s)	(b) Line number from above						
(a) Name(s) of supported organization(s)	(b) Line number from above								
<b>14</b>	<input type="checkbox"/> An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)								

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12 ) **Use cash method of accounting.****Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants See line 28 )	558,407	543,551	481,022	450,069	2,033,049
<b>16</b> Membership fees received	32,445	26,765	29,940	29,390	118,540
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	104,531	16,911	86,055	44,060	251,557
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,089	354	630	406	2,479
<b>19</b> Net income from unrelated business activities not included in line 18					0
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
<b>22</b> Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	3,000	3,000			6,000
<b>23</b> Total of lines 15 through 22	699,472	590,581	597,647	523,925	2,411,625
<b>24</b> Line 23 minus line 17	594,941	573,670	511,592	479,865	2,160,068
<b>25</b> Enter 1% of line 23	6,995	5,906	5,976	5,239	
<b>26 Organizations described on lines 10 or 11:</b>					
<b>a</b> Enter 2% of amount in column (e), line 24					<b>26a</b> 43,201
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts					<b>26b</b>
<b>c</b> Total support for section 509(a)(1) test Enter line 24, column (e)					<b>26c</b> 2,160,068
<b>d</b> Add Amounts from column (e) for lines	18 2,479	19 0			
	22	26 b			<b>26d</b> 8,479
<b>e</b> Public support (line 26c minus line 26d total)					<b>26e</b> 2,151,589
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 99.61 %
<b>27 Organizations described on line 12:</b>					
<b>a</b> For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " Do not file this list with your return. Enter the sum of such amounts for each year	(2004)	(2003)	(2002)	(2001)	
<b>b</b> For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals ) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year	(2004)	(2003)	(2002)	(2001)	
<b>c</b> Add Amounts from column (e) for lines	15	16			
	17	20	21		
<b>d</b> Add Line 27a total and line 27b total					<b>27c</b>
<b>e</b> Public support (line 27c total minus line 27d total)					<b>27d</b>
<b>f</b> Total support for section 509(a)(2) test Enter amount from line 23, column (e)					<b>27e</b>
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27f</b>
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27g</b>
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					<b>27h</b>

**Part V Private School Questionnaire** (See page 7 of the instructions.)**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
<b>29</b>	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
<b>30</b>	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
<b>31</b>	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )		
<b>32</b>	Does the organization maintain the following		
<b>a</b>	Records indicating the racial composition of the student body, faculty, and administrative staff?		
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?		
<b>c</b>	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
<b>d</b>	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		
<b>33</b>	Does the organization discriminate by race in any way with respect to		
<b>a</b>	Students' rights or privileges?		
<b>b</b>	Admissions policies?		
<b>c</b>	Employment of faculty or administrative staff?		
<b>d</b>	Scholarships or other financial assistance?		
<b>e</b>	Educational policies?		
<b>f</b>	Use of facilities?		
<b>g</b>	Athletic programs?		
<b>h</b>	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )		
<b>34a</b>	Does the organization receive any financial aid or assistance from a governmental agency?		
<b>b</b>	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
<b>35</b>	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)  
(To be completed ONLY by an eligible organization that filed Form 5768)Check  **a** if the organization belongs to an affiliated group Check  **b** if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		<b>(a)</b> Affiliated group totals	<b>(b)</b> To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred )			
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table— <b>If the amount on line 40 is—</b> <b>The lobbying nontaxable amount is—</b> Not over \$500,000                                      20% of the amount on line 40 Over \$500,000 but not over \$1,000,000      \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000    \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000    \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000                                    \$1,000,000	<b>41</b>	
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>45</b>	Lobbying nontaxable amount				
<b>46</b>	Lobbying ceiling amount (150% of line 45(e))				
<b>47</b>	Total lobbying expenditures				
<b>48</b>	Grassroots nontaxable amount				
<b>49</b>	Grassroots ceiling amount (150% of line 48(e))				
<b>50</b>	Grassroots lobbying expenditures				

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

	Yes	No	Amount
<b>a</b> Volunteers	Yes		
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.)	Yes		
<b>c</b> Media advertisements	Yes		12,587
<b>d</b> Mailings to members, legislators, or the public		No	
<b>e</b> Publications, or published or broadcast statements	Yes		2,309
<b>f</b> Grants to other organizations for lobbying purposes		No	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body	Yes		3,243
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		No	
<b>i</b> Total lobbying expenditures (Add lines c through h.)			18,139

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities



**Additional Data****Software ID:****Software Version:****EIN:** 23-7447365**Name:** NATIONAL WILDLIFE REFUGE  
ASSOCIATION**Form 990, Part II, Line 43 - Other expenses not covered above (itemize):**

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>a</b> EXPENSES	<b>43a</b>				
<b>b</b> AWARDS PROGRAM	<b>43b</b>	7,998	7,998		
<b>c</b> CONSULTING	<b>43c</b>	19,910	19,893	14	3
<b>d</b> DUES AND SUBSCRIPTIONS	<b>43d</b>	2,072	2,072		
<b>e</b> EDUCATION & MEDIA OUTREACH	<b>43e</b>	9,250	9,250		
<b>f</b> GENERAL INSURANCE	<b>43f</b>	4,373	3,801	466	106
<b>g</b> LICENSE AND FEES	<b>43g</b>	5,667	4,926	604	137
<b>h</b> MEMBERSHIP DRIVE	<b>43h</b>	796	796		
<b>i</b> MISCELLANEOUS	<b>43i</b>	1,557	1,486	57	14
<b>j</b> REFUGE NET	<b>43j</b>	11,707	11,660	38	9
<b>k</b> REGIONAL REPRESENTATIVES	<b>43k</b>	233	233		
<b>l</b> RELOCATION COST	<b>43l</b>	5,203	4,523	554	126
<b>m</b> MEMBERSHIP INCENTIVE	<b>43m</b>	1,854			1,854
<b>n</b> PHOTO CONTEST	<b>43n</b>	5,305	5,305		
<b>o</b> POLICY - ARCTIC	<b>43o</b>	12,587	12,587		
<b>p</b> POLICY - INVASIVES	<b>43p</b>	8,024	8,024		
<b>q</b> POLICY - BEYOND THE BOUNDARIE	<b>43q</b>	60,220	60,220		

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
EVAN HIRSCH 1901 PENNSYLVANIA A WASHINGTON,DC 20006	PRESIDENT 40 00	110,251	5,513	0
ANN HARVEY 1901 PENNSYLVANIA A WASHINGTON,DC 20006	CHAIR 10 00	0	0	0
ROBERT FIELDS 1901 PENNSYLVANIA A WASHINGTON,DC 20006	VICE CHAIR 4 00	0	0	0
JEFFREY SMITH 1901 PENNSYLVANIA A WASHINGTON,DC 20006	SECRETARY 4 00	0	0	0
THOMAS A WATHEN 1901 PENNSYLVANIA A WASHINGTON,DC 20006	TREASURER 4 00	0	0	0
MOLLY P BROWN 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
CHARLES D ESTES 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
JOSEPH P MAZZONI 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
NANCY MARSHALL 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
TODD VEALE 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
EDITH T EDDY 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
DAVID H HOUGHTON 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
WILLIAM H MEADOWS 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
ROBERT M MORGAN 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
KATHY WOODWARD 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
LORRAINE HOOD 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
PHILP W NORTON 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0
DONAL C O'BRIEN 1901 PENNSYLVANIA A WASHINGTON,DC 20006	BOARD MEMBER 4 00	0	0	0

**Form 990, Part VI, Line 90a - List the states with which a copy of this return is filed:**

List the states with which a copy of this return is filed	AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NM, NH, NJ, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, DC, WV, WI
---	--

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 23-7447365

**Name:** NATIONAL WILDLIFE REFUGE  
ASSOCIATION

**Line 2d - Note on Compensation:** SEE 990/990EZ

**TY 2005 Investments - Securities Schedule**

**Name:** NATIONAL WILDLIFE REFUGE  
ASSOCIATION

**EIN:** 23-7447365

Description	Book Value	Cost/FMV
COMMON STOCK	14,650	

**TY 2005 Land etc. Schedule**

**Name:** NATIONAL WILDLIFE REFUGE  
ASSOCIATION

**EIN:** 23-7447365

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
FURNITURE	10,056	6,845	6,845
COMPUTER EQUIPMENT	17,314	12,019	12,019

**TY 2005 Other Assets Schedule**

**Name:** NATIONAL WILDLIFE REFUGE  
ASSOCIATION

**EIN:** 23-7447365

Description	Beginning of Year Amount	End of Year Amount
SECURITY DEPOSIT	1,422	3,421

**TY 2005 Non Electing Public Charities Statement**

**Name:** NATIONAL WILDLIFE REFUGE  
ASSOCIATION

**EIN:** 23-7447365

**Statement:** THESE LEGISLATIVE ACTIVITIES WERE IN CONNECTION WITH THE FOLLOWING ITEMS: 1. INTERIOR APPROPRIATIONS AND AGENCY ALLOCATIONS FOR 2006-2007 2. REFUGE SYSTEM LEGISLATION REGARDING POLICY AND MANAGEMENT

**TY 2005 Other Income Schedule**

**Name:** NATIONAL WILDLIFE REFUGE  
ASSOCIATION

**EIN:** 23-7447365

Description	2003	2002	2001	2000	Total
ROYALTY	3,000	3,000			6,000

**TY 2005 Self Dealing Statement**

**Name:** NATIONAL WILDLIFE REFUGE  
ASSOCIATION

**EIN:** 23-7447365

<b>Line Number</b>	<b>Explanation</b>
2d	BOARD MEMBERS WERE REIMBURSED FOR DOCUMENTED EXPENSES RELATING TO BUSINESS EXPENSES IN THE AMOUNT OF 2597.85 THE WIFE OF THE PRESIDENT, A FREELANCE MAGAZINE AND PUBLICATIONS CONSULTANT, WAS PAID 5000.00 TO EDIT WILDLIFE REFUGE MAGAZINE.