Form **990**

Department of the Treasury
Internal Revenue Service

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* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning July 01 , 2024, and ending June 30 , 20 25

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization National 4-H Council

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 655 15TH Street, NW,

Room/suite: Suite 220,

City or town, state or province, country, and ZIP or foreign postal code: Washington, DC 20005

D Employer identification number: 36-2862206

E Telephone number: (202) 248-6800

G Gross receipts $ 166,703,976

F Name and address of principal officer: Jill Bramble
655 15TH Street, NW, Suite 220, Washington, DC 20005

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website:

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1976

M State of legal domicile: OH

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
National 4-H Council provides research-backed, hands-on learning experiences to help young people gain the skills they need to be proactive forces in their communities and lead for a lifetime.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	22
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	22
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	138
6	Total number of volunteers (estimate if necessary)	6	23
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

Revenue

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		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	4,279,421	39,803,714
9	Program service revenue (Part VIII, line 2g)	2,129,883	2,121,184
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,941,046	3,882,296
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	440,927	1,652,352
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,791,277	47,459,546

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,527,898	7,559,868
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	6,201,735	18,350,595
16a	Professional fundraising fees (Part IX, column (A), line 11e)	131,262	342,449
b	Total fundraising expenses (Part IX, column (D), line 25) 7,819,483		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	9,335,203	18,007,579
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	17,196,098	44,260,491
19	Revenue less expenses. Subtract line 18 from line 12	(8,404,821)	3,199,055

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	130,628,604	140,739,141
21	Total liabilities (Part X, line 26)	19,467,363	19,845,275
22	Net assets or fund balances. Subtract line 21 from line 20	111,161,241	120,893,866

Part II Signature Block

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

Sign Here

Signature of officer: Jill Bramble

Date: 05/14/2026

Type or print name and title: Jill Bramble, President and CEO

Paid Preparer Use Only

Print/Type preparer's name: Todd Teresco	Preparer's signature: Todd R. Teresco	Date: 05/14/2026	Check ☐ if self-employed; PTIN: P00247720
Firm's name: BDO USA			Firm's EIN: 13-5381590
Firm's address: 8401 Greensboro Drive, STE 800, Mclean, VA 22102			Phone no. (703) 893-0600

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 . . . . . ☐

1 Briefly describe the organization's mission:

National 4-H Council's mission is to expand opportunities for all of Americas youth through increased investment and participation in 4-H positive youth development. The 4-H system is comprised of a unique private-public partnership between our nation's land-grant universities, Federal and local government agencies, foundations and professional associations. These partners work together to provide rich educational content and curricula, cutting-edge technology and innovative thought-leadership.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ **Yes** ☑ **No**
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ **Yes** ☑ **No**
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses **$16,460,177** including grants of **$7,245,490**) (Revenue **$1,926,311**)

Academic & career readiness: by harnessing the national and local power of the 4-H network, we are scaling programming to accelerate our impact and amplifying youth voice as we prepare a 4-H beyond ready generation. Through this work, we are empowering our six million 4-H'ers to be ready for work and life across every county and parish in the country. Millions of young people lack access to opportunities that would develop the skills they need to succeed, including confidence, teamwork, creativity, and innovation. 4-H's national youth events engage teens and educators from around the country to find answers to problems and equip them to create change. This empowers them to become leaders; the next wave of innovators who influence others and live the ideals that foster a vibrant and creative economy. Our annual youth event, ignite by 4-H see high school students and extension professionals convene in the Washington, D.C. Area for immersive experiences that empower them to connect and find their spark. Ignite attendees explore the best 4-h has to offer in stem, agriscience, animal science, healthy living, civic engagement and career readiness through experiences that include career panels, career preparation, educational workshops, and the development of local engagement plans. We situate youth at the center of every storytelling opportunity. Whether it's digital storytelling, partnership engagements, or pr opportunities, we ensure our young people are involved and elevated. One of the most impactful examples of our storytelling is our 4-H youth in action program, which amplifies the diverse stories and leadership of 4-H youth who are making a difference in their communities every day. Each applicant receives digital, interview, and storytelling training from 4-H professionals, as well as national multi-media and spokesperson opportunities. In addition, our four youth in action winners receive a scholarship for higher education; a year of personal, professional and media development and training; national opportunities to serve as a spokesperson and key thought leader in their program area; all-expenses paid trips for themselves and a chaperone to travel as a 4-H ambassador; an official reference letter from a national 4-H council leader for educational or career purposes; networking opportunities; and documentary-style videos that position each winner's community work to local and national media.

4b (Code:) (Expenses **$5,939,410** including grants of **$85,723**) (Revenue **$1,792,906**)

Investing in educators: our highly-trained 3,500 educators and 500,000 volunteers are critical for the creation and delivery of our 4-h youth development programming. Through online and in-person courses, conferences and immersions, the 4-H PYD academy provides research-backed learning opportunities that equip 4-H educators and volunteers with the essential knowledge and skills to plan, implement, and evaluate 4-H youth development programs that help young people prepare for work and life. The only online platform to offer engaging, research-based youth and educator content from 100 universities and 4-H local programming, clover by 4-H extends educator impact by providing over 300 hands-on, educational resources to youth and their caregivers anytime, anywhere.

4c (Code:) (Expenses **$4,864,000** including grants of **$228,655**) (Revenue **$54,319**)

Other programs: the 4-H story, extension relations council provides best-in-class storytelling resources to amplify our message nationally, while also creating customizable pieces for local storytelling by 4-H programs across the country. These resources ensure consistent, inspirational and impactful messaging and creative assets that lift up 4-H youth and the programs that serve them. The extension relations team drives increased engagement in council's lines of business and cooperative extension's initiatives to grow 4-H's reach and relevance. The team does this through strategic relationship management with 4-H network stakeholders; targeted communications and outreach; leveraging national convenings to mobilize the network and accelerate impact; and using their expertise to inform council's operations and build a council culture that is in service to cooperative extension.

4d Other program services (Describe in Schedule O.)
(Code:) (Expenses including grants of) (Revenue)

4e **Total program service expenses** **$27,263,587**

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	110		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		☑	☐

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	138		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		☑	☐
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		☐	☑
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	3b		☐	☐
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		☐	☑
b	If "Yes," enter the name of the foreign country ---------- See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		☐	☑
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		☐	☑
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		☐	☐
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		☐	☑
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		☐	☐
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		☐	☑
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		☐	☐
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		☐	☑
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		☐	☑
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		☐	☑
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		☐	☐
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		☐	☐
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		☐	☐
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		☐	☐
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		☐	☐
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a		☐	☐
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.	13a		☐	☐
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		☐	☑
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	14b		☐	☐
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15		☐	☑
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		☐	☑
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17		☐	☐

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	1a	22		
b	Enter the number of voting members included on line 1a, above, who are independent .	1b	22		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		☐	☑
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		☐	☑
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		☐	☑
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		☐	☑
6	Did the organization have members or stockholders?	6		☐	☑
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		☐	☑
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		☐	☑
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		☑	☐
b	Each committee with authority to act on behalf of the governing body?	8b		☑	☐
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9		☐	☑

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed See Statements

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.

Jill Bramble, 655 15TH Street, NW, Suite 220, Washington, DC, 20005, (202) 248-6800

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Jill Bramble President and CEO	40 0	☐	☐	☑	☐	☐	☐	541,290	0	54,457
(2) Heather Elliott SVP Chief Development and Marketing	40 0	☐	☐	☐	☑	☐	☐	318,477	0	73,144
(3) Stan Harrell SVP Chief Financial Officer	40 0	☐	☐	☑	☐	☐	☐	362,353	0	18,743
(4) Andrew Ferrin SVP Chief Strategy Officer	40 0	☐	☐	☐	☑	☐	☐	300,097	0	41,529
(5) Ivan Heredia SVP Chief Marketing Officer	40 0	☐	☐	☐	☐	☐	☑	293,936	0	39,601
(6) Shawnda H Howard SVP Chief People Officer	40 0	☐	☐	☐	☑	☐	☐	214,418	0	37,357
(7) Jessica Shuster Murray VP Finance and Controller	40 0	☐	☐	☐	☐	☑	☐	195,303	0	46,018
(8) Jake Worcester VP Development	40 0	☐	☐	☐	☐	☑	☐	199,644	0	23,948
(9) Estella McCollum VP Educator Product Innovation	40 0	☐	☐	☐	☐	☑	☐	201,354	0	14,957
(10) Krishna Yendluri VP Information Technology	40 0	☐	☐	☐	☐	☑	☐	205,091	0	11,062
(11) Jennifer McIver VP Extension Engagement	40 0	☐	☐	☐	☐	☑	☐	189,799	0	13,342
(12) Eliza Hernandez Chakos Chief of Staff and Government	40 0	☐	☐	☐	☑	☐	☐	168,569	0	23,858
(13) Mark Berven Chair Board of Trustees	2 0	☑	☐	☑	☐	☐	☐	0	0	0
(14) Juliette B Bell PhD Vice Chair Board of Trustees	2 0	☑	☐	☑	☐	☐	☐	0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Richard Maltsbarger Treasurer Board of Trustees	2 0	☑	☐	☑	☐	☐	☐	0	0	0
(16) Janice Abraham Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(17) Jackie Applegate PhD Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(18) Tiffany Atwell Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(19) Emmy Beck-Aden Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(20) Martha Bernadett MD MBA Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(21) Alysia Borsa Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(22) Leslie Coleman Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(23) E Gordon Gee PhD Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(24) Karis T Gutter Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
(25) Shannon Hauf Member Board of Trustees	2 0	☑	☐	☐	☐	☐	☐	0	0	0
1b **Subtotal**								3,190,331	0	398,016
c **Total from continuation sheets to Part VII, Section A**								0	0	0
d **Total (add lines 1b and 1c)**								3,190,331	0	398,016

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 53

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

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
Hi Mum Said Dad LTD, Unit 4 39A Underwood Street, London, England,UK N17LG	IT Consultant	901,287
Allied Advertising Limited Partners, 55 Cambridge Parkway, Suite 200, Cambridge, MA 02142	Marketing Services	559,650
Qualtrics LLC, Po Box 29650, Phoenix, AZ 85038	Software	308,445
Stratuslive, 6465 College Park SQ, STE 310, Virginia Beach, VA 23464	Software	267,517
Baker Hostetler LLP, PO BOX, 70189, Cleveland, OH 44190-0189	Legal Services	249,209

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 17

Part VIII Statement of Revenue

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

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a	8,143				
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	1,137,933				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	38,657,638				
	g	Noncash contributions included in lines 1a–1f	1g	$ 0				
	h	**Total.** Add lines 1a–1f			39,803,714			
Program Service Revenue			Business Code					
	2a	PYD Events Registration	624110		1,926,313	1,926,313	0	0
	b	PYD Academies Registration	624100		139,150	139,150	0	0
	c	Other Program Service Revenue	624100		55,721	55,721	0	0
	d				0	0	0	0
	e				0	0	0	0
	f	All other program service revenue			0	0	0	0
	g	**Total.** Add lines 2a–2f			2,121,184			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			3,143,884	0	0	3,143,884
	4	Income from investment of tax-exempt bond proceeds			0	0	0	0
	5	Royalties			0	0	0	0
				(i) Real / (ii) Personal				
	6a	Gross rents	6a	0 / 0				
	b	Less: rental expenses	6b	0 / 0				
	c	Rental income or (loss)	6c	0 / 0				
	d	Net rental income or (loss)			0	0	0	0
				(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a	117,616,012 / 0				
	b	Less: cost or other basis and sales expenses	7b	116,831,701 / 45,899				
	c	Gain or (loss)	7c	784,311 / (45,899)				
	d	Net gain or (loss)			738,412	0	0	738,412
	8a	Gross income from fundraising events (not including $ 0 of contributions reported on line 1c). See Part IV, line 18	8a	0				
	b	Less: direct expenses	8b	0				
	c	Net income or (loss) from fundraising events			0		0	0
	9a	Gross income from gaming activities. See Part IV, line 19	9a	0				
	b	Less: direct expenses	9b	0				
	c	Net income or (loss) from gaming activities			0	0	0	0
	10a	Gross sales of inventory, less returns and allowances	10a	4,019,182				
	b	Less: cost of goods sold	10b	2,366,830				
	c	Net income or (loss) from sales of inventory			1,652,352	1,652,352	0	0
Miscellaneous Revenue			Business Code					
	11a				0	0	0	0
	b				0	0	0	0
	c				0	0	0	0
	d	All other revenue			0	0	0	0
	e	**Total.** Add lines 11a–11d			0			
	12	**Total revenue.** See instructions			47,459,546	3,773,536	0	3,882,296

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,491,668	7,491,668		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	68,200	68,200		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,268,778	362,534	1,478,752	427,492
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	13,419,243	5,569,683	3,720,140	4,129,420
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	375,758	161,142	96,402	118,214
9 Other employee benefits	1,317,189	538,743	401,151	377,295
10 Payroll taxes	969,627	369,983	317,786	281,858
11 Fees for services (nonemployees):				
a Management				
b Legal	404,786		404,786	
c Accounting	333,221	25,346	306,837	1,038
d Lobbying	168,245	145,745	22,500	
e Professional fundraising services. See Part IV, line 17	342,449			342,449
f Investment management fees	336,714		336,714	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	3,934,662	3,056,656	552,523	325,483
12 Advertising and promotion	180,661	168,681	2,003	9,977
13 Office expenses	501,822	186,829	145,063	169,930
14 Information technology	2,591,787	1,476,248	366,640	748,899
15 Royalties	40,286	40,286		
16 Occupancy	1,013,678	643,171	195,522	174,985
17 Travel	964,879	443,307	187,746	333,826
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,232,523	5,834,843	222,239	175,441
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	956,513	632,072	144,994	179,447
23 Insurance	229,036	4,823	220,586	3,627
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)				
a Other - Dues & Subscriptions	118,766	43,627	55,037	20,102
b				
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	44,260,491	27,263,587	9,177,421	7,819,483
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance 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
Assets	1	Cash—non-interest-bearing		5,458,214	1	6,270,329
	2	Savings and temporary cash investments		0	2	
	3	Pledges and grants receivable, net		15,972,340	3	15,000,370
	4	Accounts receivable, net		147,410	4	156,604
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		0	6	
	7	Notes and loans receivable, net		0	7	
	8	Inventories for sale or use		1,315,120	8	1,291,976
	9	Prepaid expenses and deferred charges		1,117,728	9	847,206
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,434,583			
	b	Less: accumulated depreciation	10b 2,079,807	3,880,199	10c	3,354,776
	11	Investments—publicly traded securities		95,159,591	11	106,626,351
	12	Investments—other securities. See Part IV, line 11		0	12	
	13	Investments—program-related. See Part IV, line 11		0	13	
	14	Intangible assets		0	14	
	15	Other assets. See Part IV, line 11		7,578,002	15	7,191,529
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		130,628,604	16	140,739,141
Liabilities	17	Accounts payable and accrued expenses		4,897,760	17	5,871,986
	18	Grants payable		0	18	115,832
	19	Deferred revenue		233,124	19	
	20	Tax-exempt bond liabilities		0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	22	
	23	Secured mortgages and notes payable to unrelated third parties		0	23	
	24	Unsecured notes and loans payable to unrelated third parties		0	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		14,336,479	25	13,857,457
	26	**Total liabilities.** Add lines 17 through 25		19,467,363	26	19,845,275
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		78,892,801	27	76,045,620
	28	Net assets with donor restrictions		32,268,440	28	44,848,246
		Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		111,161,241	32	120,893,866
	33	Total liabilities and net assets/fund balances		130,628,604	33	140,739,141

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	47,459,546
2	Total expenses (must equal Part IX, column (A), line 25)	2	44,260,491
3	Revenue less expenses. Subtract line 2 from line 1	3	3,199,055
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	111,161,241
5	Net unrealized gains (losses) on investments	5	6,168,464
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	365,106
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	120,893,866

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: ☐ 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?	2a	☐	☑
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both.			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	☑	☐
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.			
	☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	☑	☐
	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?	3a	☑	☐
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	3b	☑	☐

SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization	Employer identification number
National 4-H Council	36-2862206

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations 0

g Provide the following information about the supported organization(s).

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	90,902,825	25,767,450	30,711,981	4,279,421	39,803,714	191,465,391
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 **Total.** Add lines 1 through 3	90,902,825	25,767,450	30,711,981	4,279,421	39,803,714	191,465,391
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						52,511,662
6 **Public support.** Subtract line 5 from line 4						138,953,729

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	90,902,825	25,767,450	30,711,981	4,279,421	39,803,714	191,465,391
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	256,893	981,053	2,634,002	989,275	3,143,884	8,005,107
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
11 **Total support.** Add lines 7 through 10						199,470,498

12 Gross receipts from related activities, etc. (see instructions) 12 28,349,879

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) . . . . 14 69.66 %

15 Public support percentage from 2023 Schedule A, Part II, line 14 . . . . . 15 70.95 %

16a **33 1/3% support test—2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . . ☑

b **33 1/3% support test—2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . . ☐

17a **10%-facts-and-circumstances test—2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . . ☐

b **10%-facts-and-circumstances test—2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . . ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ☐

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

19a **33 1/3% support tests—2024.** 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—2023.** 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
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *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.*	1	☐	☐
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2	☐	☐
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a	☐	☐
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)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b	☐	☐
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c	☐	☐
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a	☐	☐
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *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.*	4b	☐	☐
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *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.*	4c	☐	☐
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *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).*	5a	☐	☐
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	☐	☐
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c	☐	☐
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI****.*	6	☐	☐
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7	☐	☐
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8	☐	☐
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI****.*	9a	☐	☐
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? *If "Yes," provide detail in* ***Part VI****.*	9b	☐	☐
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI****.*	9c	☐	☐
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a	☐	☐
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b	☐	☐

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (****see instructions****).*

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a governmental entity (see instructions).*

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

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

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

Section A—Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	**1**		
2	Recoveries of prior-year distributions	**2**		
3	Other gross income (see instructions)	**3**		
4	Add lines 1 through 3.	**4**		
5	Depreciation and depletion	**5**		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7	Other expenses (see instructions)	**7**		
8	**Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	**8**		

Section B—Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	**1a**		
b	Average monthly cash balances	**1b**		
c	Fair market value of other non-exempt-use assets	**1c**		
d	**Total** (add lines 1a, 1b, and 1c)	**1d**		
e	**Discount** claimed for blockage or other factors *(explain in detail in* ***Part VI****)*:			
2	Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3	Subtract line 2 from line 1d.	**3**		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	**4**		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6	Multiply line 5 by 0.035.	**6**		
7	Recoveries of prior-year distributions	**7**		
8	**Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C—Distributable Amount				Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2	Enter 0.85 of line 1.	**2**		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4	Enter greater of line 2 or line 3.	**4**		
5	Income tax imposed in prior year	**5**		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

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

Section E—Distribution Allocations (see instructions)		**(i) Excess Distributions**	**(ii) Underdistributions Pre-2024**	**(iii) Distributable Amount for 2024**
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required—*explain in* ***Part VI***). See instructions.			
3	Excess distributions carryover, if any, to 2024			
a	From 2019			
b	From 2020			
c	From 2021			
d	From 2022			
e	From 2023			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* ***Part VI***. See instructions.			
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* ***Part VI***. See instructions.			
7	**Excess distributions carryover to 2024.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2020 . . .			
b	Excess from 2021 . . .			
c	Excess from 2022 . . .			
d	Excess from 2023 . . .			
e	Excess from 2024 . . .			

Schedule B (Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2024

Name of the organization
National 4-H Council

Employer identification number
36-2862206

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☑ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33⅓% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (**1**) $5,000; or (**2**) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . $ 0

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization: National 4-H Council

Employer identification number: 36-2862206

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	$ 15,000,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
2	N/A	$ 5,300,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
3	N/A	$ 5,000,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
4	N/A	$ 2,324,568	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
5	N/A	$ 1,800,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
6	N/A	$ 1,605,889	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of the Organization	EIN
National 4-H Council	36-2862206

Part 1 **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A	$1,500,000.00	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
8	N/A	$1,162,509.00	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization: National 4-H Council

Employer identification number: 36-2862206

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization
National 4-H Council

Employer identification number
36-2862206

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) $ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C (Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No. 1545-0047

2024

Open to Public Inspection

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

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

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

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

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

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

Name of organization	Employer identification number
National 4-H Council	36-2862206

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions . . . . . $

3 Volunteer hours for political campaign activities. See instructions . . . . . .

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . . ☐ Yes ☐ No

4a Was a correction made? . . . . . ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . $

4 Did the filing organization file **Form 1120-POL** for this year? . . . . . ☐ Yes ☐ No

5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	0	0
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	0	0
c	Total lobbying expenditures (add lines 1a and 1b)	0	0
d	Other exempt purpose expenditures	0	0
e	Total exempt purpose expenditures (add lines 1c and 1d)	0	0
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	0	0
g	Grassroots nontaxable amount (enter 25% of line 1f)	0	0
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0	0
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0	0

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
not over $500,000,	20% of the amount on line 1e.
over $500,000 but not over $1,000,000,	$100,000 plus 15% of the excess over $500,000.
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.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☑ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)		(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a	Lobbying nontaxable amount	0	0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column (e))					0
c	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	0	0	0	0	0
e	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures	0	0	0	0	0

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	☐	☑	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	☐	☑	
c Media advertisements?	☐	☑	
d Mailings to members, legislators, or the public?	☐	☑	
e Publications, or published or broadcast statements?	☐	☑	
f Grants to other organizations for lobbying purposes?	☐	☑	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	☑	☐	168,245
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	☐	☑	
i Other activities?	☐	☑	
j Total. Add lines 1c through 1i			168,245
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?	☐	☑	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	☐	☐	

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

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

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

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

Part IV Supplemental Information

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

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

Part and Line Number: **Part II-B Line 1g**

General advocacy to raise awareness of the 4-H program.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization
National 4-H Council

Employer identification number
36-2862206

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

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included on line 2a	2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 $

(ii) Assets included in Form 990, Part X $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

a Revenue included on Form 990, Part VIII, line 1 $

b Assets included in Form 990, Part X $

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other _____

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

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

Part IV Escrow and Custodial Arrangements

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

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

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

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

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

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

Part V Endowment Funds

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	9,030,938	8,911,189	8,203,095	8,541,050	8,751,389
b Contributions	300,000	0	84,604	54,556	61,396
c Net investment earnings, gains, and losses	523,929	127,960	635,534	(384,467)	(256,867)
d Grants or scholarships	0	0	0	0	0
e Other expenditures for facilities and programs	0	8,211	12,044	8,044	14,868
f Administrative expenses	0	0	0	0	0
g End of year balance	9,854,867	9,030,938	8,911,189	8,203,095	8,541,050

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

a Board designated or quasi-endowment 65.83%
b Permanent endowment 5.43%
c Term endowment 28.74%

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

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

	Yes	No
(i) Unrelated organizations? 3a(i)	☐	☑
(ii) Related organizations? 3a(ii)	☐	☑
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b	☐	☐

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	2,118,638	303,984	1,814,654
d Equipment	0	610,940	214,203	396,737
e Other	0	2,705,005	1,561,620	1,143,385
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				3,354,776

Part VII Investments—Other Securities

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

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

Part VIII Investments—Program Related

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) Right of use asset - leases	7,191,529
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 15, col. (B))*	7,191,529

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Lease Obligation	11,424,874
(3) Accrued Post Retirement Benefit	2,143,704
(4) Agency Funds	67,773
(5) Unfunded Pension Liability	221,106
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	13,857,457

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

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

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

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

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

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

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

Part XIII Supplemental Information

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

Part XIII Supplemental Information *(Continued)*

Part and Line Number: **Part X Line 2**

Council follows the provisions of FASB accounting standards codification (ASC) 740, income taxes. Under ASC 740, an organization must recognize the tax benefit associated with tax positions taken for tax return purposes when it is more-likely-than-not that the position will be sustained. Council does not believe there are any material uncertain tax positions and, accordingly, it will not recognize any liability for unrecognized tax benefits. Council has filed for and received income tax exemptions in the jurisdictions where it is required to do so. Additionally, council has filed IRS form 990 and form 990-T tax returns, as required, and all other applicable returns in jurisdictions where it is required. Council believes that it is no longer subject to U.S. Federal, state and local, or non-U.S. Income tax examinations by tax authorities for fiscal years prior to 2021. For the years ended June 30, 2024 and 2025, no interest or penalties were recorded or included in the consolidated stmt.

Part and Line Number: **Part V Line 4**

Endowment funds are intended to be used for educational programs.

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

Employer identification number

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☑ Mail solicitations
- **b** ☑ Internet and email solicitations
- **c** ☑ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☑ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1 For Momentum LLC, 1816 Independence Square, Suite D, Atlanta, GA 30338	Direct solicitation & prospecting	☐	☑	0	20,400	(20,400)
2 Social Capital, Inc., 980 N. Michigan Ave, Suite 1610, Chicago, IL 60611	Consult, create & delivered support for strategic campaign	☐	☑	0	133,000	(133,000)
3 Aperio Philanthropy, 300 Cadman Plaza West, 12th Floor - #8600, Brooklyn, NY 11201	Training and direct coaching	☐	☑	0	180,000	(180,000)
4		☐	☐			
5		☐	☐			
6		☐	☐			
7		☐	☐			
8		☐	☐			
9		☐	☐			
10		☐	☐			
Total				0	333,400	(333,400)

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ
NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, VA, WA, WV, WI

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 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through 9 in column (d)				
	11	Net income summary. Subtract line 10 from line 3, column (d)				

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))
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

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**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

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 _____

Gaming manager compensation $ _____

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 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* for the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization
National 4-H Council

Employer identification number
36-2862206

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 **(a)** Name and address of organization or government	**(b)** EIN	**(c)** IRC section (if applicable)	**(d)** Amount of cash grant	**(e)** Amount of noncash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of noncash assistance	**(h)** Purpose of grant or assistance
See supplemental information							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . 87

3 Enter total number of other organizations listed in the line 1 table . . . 2

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1	See supplemental information					
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part IV Supplemental Information

Part and Line Number: **Part II - Grants and Other Assistance to Domestic Organizations and Domestic Governments**

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
1	Alabama 4-H Club Foundation 226 Duncan Hall, Auburn University, AL 36849	63-0457929	501(c)(3)	$91,242	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
2	Alabama A&M University Foundation 4900 Meridian Street, Normal, AL 35762	23-7067600	501(c)(3)	$100,375	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
3	Arizona 4H Youth Foundation 1140 East South Campus Dr, #110 PO Box 210036, Tuscon, AZ 85721	23-7083384	501(c)(3)	$16,908	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
4	Auburn University 208 M White Smith Hall, Auburn University, AL 36849	63-6000724	State of Alabama	$9,422	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
5	Board of Regents Nevada System High Education 1664 N. Virginia St MS 0405, Reno, NV 89557	88-6000024	501(c)(3)	$44,950	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
6	Board of Regents of University of Nebraska For University of Nebraska-Linco 151 S Paul Resrch Cntr at Whittier , 2200 Vine Street, Lincoln, NE 68583-0851	47-0049123	501(c)(3)	$647,151	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
7	Burlington County 4-H Expansion & Review 2 Academy Drive, Westampton, NJ 08060	71-1042602	501(c)(3)	$15,500	$0

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
8	California 4H Foundation P.O. Box 73673, Davis, CA 95617	23-7327765	501(c)(3)	$160,011	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
9	Colorado State University Room 108 Johnson Hall - SP, Fort Collins, CO 80523	23-7098397	State of Colorado	$124,550	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
10	Cornell Cooperative Extension of Genesee County 420 East Main Street, Batavia, NY 14020	16-6072880	501(c)(3)	$6,000	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
11	Cornell University 750 Cascadilla Street, Ithaca, NY 14851	15-0532082	501(c)(3)	$236,240	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
12	Georgia 4H Foundation 306 Hoke Smith Annex, Athens, GA 30602	58-0832988	501(c)(3)	$210,632	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
13	Kentucky 4H Foundation 209 Scovell Hall, Lexington, KY 40506-0064	23-7437297	501(c)(3)	$118,712	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
14	Kentucky State University 400 East Main Street, Frankfort, KY 40601	61-1099712	501(c)(3)	$13,670	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(h) Purpose of grant or assistance: Education					
15	Louisiana 4H Foundation 104 Efferson Hall , Baton Rouge, LA 70803	72-1367519	501(c)(3)	$97,115	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
16	Louisiana State University 110 LSU Union Square, Baton Rouge, LA 70803-0100	72-6000848	State of Louisiana	$40,982	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
17	Maryland 4H Foundation 8020 Greenmead Drive, College Park, MD 20740	52-6056016	501(c)(3)	$74,072	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
18	Massachusetts 4H Foundation 400 Main Street, Malpole, MA 02081	04-2303708	501(c)(3)	$55,294	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
19	Michigan 4H Foundation 14901 4H Drive, Tustin, MI 49688	38-1539997	501(c)(3)	$194,115	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
20	Mississippi State University P.O Drawer 5227, Mississippi, MS 39762	06-7589752	State of Mississippi	$37,072	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
21	Mississippi State University Foundation P.O. Box 6149, Mississippi, MS 39762	64-0410581	501(c)(3)	$16,500	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
22	Missouri 4H Foundation 819 Clark Hall, Columbia, MO 65211	43-6044367	501(c)(3)	$78,334	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
23	Montana 4H Foundation PO Box 173580, Bozeman, MT 59717	23-7051460	501(c)(3)	$12,176	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
24	Nebraska 4H Foundation P O Box 830719, Lincoln, NE 68583-0700	47-0469703	501(c)(3)	$80,342	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
25	North Dakota State University 1241 University Dr N, Fargo, ND 58102	23-7120898	501(c)(3)	$18,000	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
26	Oklahoma 4H Foundation 205 4-H Youth Development, Stillwater, OK 74078	73-6109761	501(c)(3)	$48,203	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
27	Oklahoma State University 205 4-H Youth Development, Stillwater, OK 74078	73-6109761	State of Oklahoma	$8,390	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
28	Oregon State University PO Box 1086, Corvallis, OR 97339-1086	48-1278540	State of Oregon	$20,304	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
29	Pine Tree State 4-H Foundation 15 Estabrooke Drive, Orono, ME 04469	01-6011487	501(c)(3)	$34,950	$0

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
30	Regents of The University of California 595 Charles E Young Drive E, Los Angeles, CA 90095	94-6002123	501(c)(3)	$39,256	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
31	Regents of The University of Idaho 875 Perimeter Drive MS 3020, Moscow, ID 83844-3020	82-6000945	501(c)(3)	$57,641	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
32	Regents of The University of Minnesota 600 McNamara Alumni Center S.E., 200 SE Oak St, Minneapolis, MN 55455	41-6007513	501(c)(3)	$187,208	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
33	Rutgers The State University of New Jersey ASB III-2ND RL-3 Rutgers Plaza-L. L, New Brunswick, NJ 08901	23-7318742	State of New Jersey	$176,817	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
34	Somerset County 4-H Association 310 Milltown Rd, Bridgewater, NJ 08807	22-6064597	501(c)(3)	$59,738	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
35	Southern University Ag Research P.O. Box 10010, Baton Rouge, LA 70813-0010	72-6000817	State of Louisiana	$5,971	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
36	Tennessee State University 3500 John Merritt Boulevard, Nashville, TN 37209	62-0786119	State of Tennessee	$23,060	$0
(f) Method of valuation: Cash					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
37	Texas 4H Youth Foundation 1470 William D Fitch Parkway, College Station, TX 77845	74-6091147	501(c)(3)	$274,691	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
38	Texas A&M Agrilife Extension Service 600 John Kimborough Blvd, Suite 509 7101 TAMU, College Station, TX 77845-7101	74-6000537	501(c)(3)	$126,864	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
39	The Board of Trustees University of Illinois 506 S. Wright St, Urbana, IL 61801	37-6000511	501(c)(3)	$24,546	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
40	The Ohio State University Foundation PO Box 710811, Columbus, OH 43271	31-1145986	501(c)(3)	$181,801	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
41	TUSKEGEE UNIVERSITY 1200 W Montgomery Rd, Tuskegee, AL 36088	63-0288878	State of Alabama	$94,000	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
42	University of Arizona P.O Box 210036, Tucson, AZ 85721	74-2652689	State of Arizona	$58,407	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
43	University of Connecticut 843 University Drive, Torrington, CT 06790	06-0772160	State of Connecticut	$34,743	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(h) Purpose of grant or assistance: Education					
44	University Of Florida 1885 Stadium Road, Gainesville, FL 32611	59-6002052	State of Florida	$122,950	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
45	University of Illinois Foundation 1305 West Green Street, Urbana, IL 61801	37-6006007	501(c)(3)	$46,666	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
46	University of Maine 107 Maine Avenue, Bangor, ME 04401	01-6000769	501(c)(3)	$39,353	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
47	University of Nevada Foundation - Reno 1664 North Virginia St. 0162, Reno, NV 89557	94-2781749	501(c)(3)	$9,671	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
48	UNIVERSITY OF WISCONSIN 436 Lowell Hall, Madison, WI 53703	39-6006492	State of Wisconsin	$18,257	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
49	University System of New Hampshire 5 Chennell Drive #301, Concord, NH 03301	02-6000937	501(c)(3)	$33,067	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
50	Utah State University 5049 Old Main Hill, Logan, UT 84322	87-6000528	State of Utah	$239,534	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
51	VIRGINIA STATE UNIVERSITY P O Box 9081, Petersburg, VA 23806	54-6074532	State of Virginia	$15,740	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
52	Virginia Tech Foundation 902 Prices Fork Rd. Suite 2400, Blacksburg, VA 24061	54-0721690	State of Virginia	$107,266	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
53	Washington State University Foundation 255 E Main St #301, Pullman, WA 99163	91-1075542	501(c)(3)	$54,746	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
54	West Virginia State University Research and Development Corporation 886 Chestnut Ridge Road PO Box 6845, Morgantown, WV 26506	55-0665758	501(c)(3)	$77,934	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
55	Wyoming State 4H Foundation 1000 E. University Avenue, Department 3314, Laramie, WY 82071	83-6000331	State of Wyoming	$12,644	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
56	Wisconsin 4H Foundation The Pyle Center, 702 Langdon Street, Madison, WI 53706	39-0914868	501(c)(3)	$21,937	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
57	West Virginia University Foundation One Waterfront Place, 7TH Floor, Morgantown, WV 26507	55-6017181	501(c)(3)	$111,228	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(h) Purpose of grant or assistance: Education					
58	UVM Foundation The University of Vermont Foundation 140 Kennedy Drive, Burlington, VT 05401	45-1556038	501(c)(3)	$17,851	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
59	University of Tennessee 2621 Morgan Circle, 225 Morgan Hall, Knoxville, TN 37996	62-6047753	State of Tennessee	$64,751	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
60	UNIVERSITY OF VERMONT & STATE AGRI COLL 655 Spear Street, Burlington, VT 05405	06-6811191	State of Vermont	$7,372	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
61	University of Minnesota Foundation 200 Oak Street SE, Suite 500, Minneapolis, MN 55455	41-6042488	501(c)(3)	$32,305	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
62	University of Maryland Eastern Shore 30665 Student Services Center Lane, Princess Anne, MD 21853	52-6002033	501(c)(3)	$11,500	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
63	University of Maryland College Park 4101 Chesapeake Bldg, 4300 Terrapin, College Park, MD 20742	52-6002033	501(c)(3)	$15,500	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
64	University of Delaware Office of the VP for Finance, Room 220, Newark, DE 19716	51-6000297	State of Delaware	$122,339	$0
(f) Method of valuation: Cash					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
65	The Trustees of Purdue University 2550 Northwestern Ave, Suite 1100, West Lafayette, IN 47906	35-6002041	501(c)(3)	$173,359	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
66	The Ohio State University 901 Woody Hayes Drive, 2020 Blanken, Columbus, OH 43210	31-6025986	501(c)(3)	$139,210	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
67	Texas 4-H Conference Center - Texas A&M Agrilife Extension Service 5600 FM 3021, Brownwood, TX 76801	74-6000537	501(c)(3)	$18,000	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
68	Tennessee 4H Club Foundation 2621 Morgan Circle NO 205, Knoxville, TN 37996	62-6047753	501(c)(3)	$241,033	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
69	South Dakota State University SDSU West River Agricultural Center, 1905 Plaza Boulevard, Rapid City, SD 57702	46-0273801	State of SD	$20,790	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
70	Regents of New Mexico State University Hadley Hall, 2850 N Weddel Drive, Las Cruces, NM 88003	85-6000642	501(c)(3)	$40,369	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
71	Pennsylvania State University 8 Grant Street, Clarion, PA 16214	24-6000376	State of PA	$419,321	$0

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
72	North Dakota 4H Foundation 1340 Administration Avenue, Fargo, ND 58102	23-7120898	State of ND	$25,497	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
73	Oregon 4H Foundation 119 Ballard Extension Hall, OSU, Corvallis, OR 97331	93-0711337	501(c)(3)	$27,024	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
74	North Carolina State University 512 Brickhaven Drive, BOX 7606, Raleigh, NC 27695	56-6000756	State of NC	$182,016	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
75	North Carolina A&T State 1601 E. Market St., Greensboro, NC 27411	56-6000007	State of NC	$145,479	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
76	National Association Extension 4H Youth Development 701 Exposition Place, Suite 206, Raleigh, NC 27615	23-7127452	501(c)(6)	$42,000	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
77	Langston University Foundation Inc P.O. Box 725, Langston, OK 73050	11-3815948	501(c)(3)	$6,224	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
78	Kansas 4H Foundation 116 Umberger Hall, Kansas State Uni, Manhattan, KS 66506-3417	48-0623884	501(c)(3)	$45,661	$0

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
79	Fort Valley State University 1005 State Univ Dr, POB 4061, Fort Valley, GA 31030	23-7281905	State of Georgia	$15,247	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
80	IOWA 4-H FOUNDATION 202 S. IST, Suite B, Greenfield, IA 50849	32-0222380	501(c)(3)	$174,505	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
81	Florida A&M University 2010 Pinder Street, Tallahassee, FL 32307	59-0977035	501(c)(3)	$86,612	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
82	Florida 4H Club Foundation 3103 Mccarty Hall, P.O. Box 110225, Gainesville, FL 32611	59-1000186	501(c)(3)	$140,290	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
83	Division of Agriculture of University of Arkansas 2301 S University Ave, Little Rock, AR 72204	62-1712458	-	$108,898	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
84	Clemson University 210 Barre Hall, Clemson, SC 29634	57-6000254	State of SC	$193,595	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
85	Board of Regents University Wisconsin System 21 N.Park Street, Suite 6401, Madison, WI 53715	39-6076198	501(c)(3)	$19,049	$0
(f) Method of valuation: Cash					

S.No	(a) Name and address of organization or government	(b) EIN	(c) IRC section(if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
86	Arizona University Arizona Board of Regents 888 N. Euclid Avenue, Room 502F, Tucson, AZ 85721	86-6004791	State of Arizona	$15,050	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
87	Alcorn State University 1000 ASU Drive, #285, Lorman, MS 39096	64-0538010	State of Mississippi	$14,020	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
88	Alabama A&M University 4900 Meridian Street, P.O. Box 967, Normal, AL 35762	63-6001097	State of Alabama	$10,655	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					
89	Nebraska 4H 3835 Holdrege Street, Lincoln, NE 66858-3070	-	501(c)(3)	$7,200	$0
(f) Method of valuation: Cash					
(g) Description of noncash assistance: N/A					
(h) Purpose of grant or assistance: Education					

Part and Line Number: **Part III - Grants and Other Assistance to Domestic Individuals**

S.No	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance
1	Education	3	$68,200	$0
(e) Method of valuation: 0				
(f) Description of noncash assistance: 0				

Part and Line Number: **Part I - Line 2**

Description of procedure for monitoring use of funds - all funds are administered as per gift policies and fiscal eligibility policies approved by the board of trustees. Each grant opportunity, supported through corporate, foundation and government funding, has clear guidelines communicated in a request for proposal issued by national 4-H council. Competitive applications are accepted through an online grants management system and reviewed in accordance with grant guidelines. Once scored and awarded, grantees sign a contract outlining deliverables and adhere to the fiscal and reporting guidelines. Sole source grantees also sign a contract outlining deliverables and adhere to the fiscal and reporting guidelines. National 4-H council account managers and/or director, foundation and federal financial management monitor the grantee throughout the life of the grant.

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* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization
National 4-H Council

Employer identification number
36-2862206

Part I Questions Regarding Compensation

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

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

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

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

	(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	Jill Bramble President and CEO	(i) (ii)	540,048 0	0 0	1,242 0	13,823 0	40,634 0	595,747 0	0 0
2	Heather Elliott SVP Chief Development and Marketing Officer	(i) (ii)	311,480 0	6,529 0	468 0	19,053 0	54,091 0	391,621 0	0 0
3	Stan Harrell SVP Chief Financial Officer	(i) (ii)	355,495 0	0 0	6,859 0	13,975 0	4,768 0	381,097 0	0 0
4	Andrew Ferrin SVP Chief Strategy Officer	(i) (ii)	295,032 0	1,500 0	3,564 0	14,011 0	27,519 0	341,626 0	0 0
5	Ivan Heredia SVP Chief Marketing Officer	(i) (ii)	126,124 0	0 0	167,812 0	9,418 0	30,183 0	333,537 0	0 0
6	Shawnda H Howard SVP Chief People Officer	(i) (ii)	213,176 0	0 0	1,424 0	8,902 0	28,455 0	251,957 0	0 0
7	Jessica Shuster Murray VP Finance and Controller	(i) (ii)	194,763 0	0 0	540 0	8,331 0	37,687 0	241,321 0	0 0
8	Jake Worcester VP Development	(i) (ii)	198,834 0	0 0	810 0	8,152 0	37,687 0	245,483 0	0 0
9	Estella McCollum VP Educator Product Innovation	(i) (ii)	200,343 0	374 0	637 0	8,526 0	6,431 0	216,311 0	0 0
10	Krishna Yendluri VP Information Technology	(i) (ii)	202,769 0	0 0	2,322 0	8,111 0	2,951 0	216,153 0	0 0
11	Jennifer McIver VP Extension Engagement	(i) (ii)	188,773 0	387 0	639 0	7,865 0	5,477 0	203,141 0	0 0
12	Eliza Hernandez Chakos Chief of Staff and Government Relations	(i) (ii)	162,840 0	5,500 0	229 0	12,215 0	11,643 0	192,427 0	0 0
13		(i) (ii)							
14		(i) (ii)							
15		(i) (ii)							
16		(i) (ii)							

Part III Supplemental Information

Part and Line Number: **Part I - Line 7**

Bonuses

Part and Line Number: **Part - I Line 4a**

Name	Amount
Ivan Heredia	167500

Part and Line Number: **Part - I Line 4b**

Name	Amount
Jill Bramble	23000
Heather Elliott	10000

Part and Line Number: **Part I - Line 4**

Key employees and officers participated in a Section 457 plan sponsored by National 4-H Council. Jill Bramble had a contribution of 23,000 and Heather Elliott had a contribution of 10,000. National 4-H Council maintains an individual account that is credited with the contributions and any gains, losses and earnings based upon the terms of the plan with executive's rights vesting annually on December 31.

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* for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization
National 4-H Council

Employer identification number
36-2862206

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1) National 4-H Activities Foundation 52-2292245 655 15TH Street NW Suite 220, Washington, DC 20005.	See Statement	OH	501(C)(3)	Schedule A Part I Line 12a	The Council	☑	☐
(2) Global Clover Network Inc 52-2292242 655 15th Street, NW, Suite 220, Washington, DC 20005.	See Statement	OH	501(C)(3)	Schedule A Part I Line 12a	The Council	☑	☐
(3) National 4-H Congress Foundation 45-2572008 655 15th Street, NW, Suite 220, Washington, DC 20005.	See Statement	OH	501(C)(3)	Schedule A Part I Line 12a	The Council	☑	☐
(4)						☐	☐
(5)						☐	☐
(6)						☐	☐
(7)						☐	☐

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? Yes	(h) Disproportionate allocations? No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) General or managing partner? No	(k) Percentage ownership
(1)							☐	☐		☐	☐	
(2)							☐	☐		☐	☐	
(3)							☐	☐		☐	☐	
(4)							☐	☐		☐	☐	
(5)							☐	☐		☐	☐	
(6)							☐	☐		☐	☐	
(7)							☐	☐		☐	☐	

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

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

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

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

			Yes	No
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?			
a	Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		✓
b	Gift, grant, or capital contribution to related organization(s)	1b		✓
c	Gift, grant, or capital contribution from related organization(s)	1c		✓
d	Loans or loan guarantees to or for related organization(s)	1d		✓
e	Loans or loan guarantees by related organization(s)	1e		✓
f	Dividends from related organization(s)	1f		✓
g	Sale of assets to related organization(s)	1g		✓
h	Purchase of assets from related organization(s)	1h		✓
i	Exchange of assets with related organization(s)	1i		✓
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		✓
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		✓
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l		✓
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		✓
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	✓	
o	Sharing of paid employees with related organization(s)	1o	✓	
p	Reimbursement paid to related organization(s) for expenses	1p		✓
q	Reimbursement paid by related organization(s) for expenses	1q		✓
r	Other transfer of cash or property to related organization(s)	1r		✓
s	Other transfer of cash or property from related organization(s)	1s		✓

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

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

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512—514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)				☐	☐			☐	☐		☐	☐	
(2)				☐	☐			☐	☐		☐	☐	
(3)				☐	☐			☐	☐		☐	☐	
(4)				☐	☐			☐	☐		☐	☐	
(5)				☐	☐			☐	☐		☐	☐	
(6)				☐	☐			☐	☐		☐	☐	
(7)				☐	☐			☐	☐		☐	☐	
(8)				☐	☐			☐	☐		☐	☐	
(9)				☐	☐			☐	☐		☐	☐	
(10)				☐	☐			☐	☐		☐	☐	
(11)				☐	☐			☐	☐		☐	☐	
(12)				☐	☐			☐	☐		☐	☐	
(13)				☐	☐			☐	☐		☐	☐	
(14)				☐	☐			☐	☐		☐	☐	
(15)				☐	☐			☐	☐		☐	☐	
(16)				☐	☐			☐	☐		☐	☐	

Part VII Supplemental Information

Part and Line Number: **Part-II – Column B**

Line 1: Provides accounting and administrative support for National 4-H initiatives.

Line 2: Supports 4-H initiatives & international cooperation to increase global positive youth development.

Line 3: Operates and provides assistance with the National 4-H Congress event.

SCHEDULE O (Form 990)
(Rev December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the Organization
National 4-H Council

Employer identification number
36-2862206

Part and Line Number: **Part VI Line 11(a)**

All trustees are furnished an electronic draft copy of form 990 and are given time to confirm their review of the document. All of their comments and suggestions are resolved prior to filing the form 990.

Part and Line Number: **Part VI Line 12(c)**

The Conflict-of-Interest Policy is reviewed and acknowledged annually by all trustees, officers, and employees as part of the organization's compliance process. Trustees, officers, and employees are required to annually disclose any actual or potential conflicts of interest and affirm their understanding of and compliance with the policy. New trustees, officers, and employees are also required to review and sign the policy upon assuming their roles or employment. Compliance is monitored through the annual disclosure and certification process, management and Board oversight, and the review procedures outlined in the policy. Any disclosed or suspected conflicts are reviewed, documented, and addressed through appropriate corrective or disciplinary action when necessary. Periodic reviews are also conducted to ensure compliance with the organization's charitable and tax-exempt obligations.

Part and Line Number: **Part VI Line 15**

The process for determining the compensation of Jill Bramble includes the following: compensation study by external executive compensation consulting firm, review of form 990 for similar organizations and compensation study of similar size for-profit businesses and approval of the executive committee. The process for determining the compensation of the senior leadership team includes the following: compensation study by external executive compensation consulting firm, review of form 990 for similar organizations and compensation study of similar size for-profit businesses and approval of the executive committee.

Part and Line Number: **Part VI Line 17**

AL,AR,CA,FL,GA,HI,IL,KS,KY,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,ND,OR,PA,RI,SC,TN,VA,WV,WI

Part and Line Number: **Part VI Line 19**

Governing documents: upon request. Conflict of interest policy: upon request. Financial statements: annual report is available on own website and by request.

Part and Line Number: **Part VII, List of officers section**

Name and title and Position	Average hours per week	Reportable compensation	Reportable compensation from related organizations	Estimated amount of other compensation
Michael Lavin Member Board of Trustees Individual Trustee	2 0	$0	$0	$0
Trent Mcknight Member Board of Trustees Individual Trustee	2 0	$0	$0	$0
Dana Mcnabb Member Board of Trustees Individual Trustee	2 0	$0	$0	$0
John Ordus Member Board of Trustees Individual Trustee	2 0	$0	$0	$0
Maggie Sans Member Board of Trustees Individual Trustee	2 0	$0	$0	$0
Mary Snapp Member Board of Trustees	2 0	$0	$0	$0

Individual Trustee				
Laura Stephenson PhD Member Board of Trustees Individual Trustee	20	$0	$0	$0
Danielle Tiedt Member Board of Trustees Individual Trustee	20	$0	$0	$0
Darci Vetter Member Board of Trustees Individual Trustee	20	$0	$0	$0
Krysta Harden Member Board of Trustees Individual Trustee	20	$0	$0	$0
Wade Miquelon Member Board of Trustees Individual Trustee	20	$0	$0	$0
Aidan Spencer Member Board of Trustees Individual Trustee	20	$0	$0	$0
Janis Penman Secretary Board of Trustees Officer	20	$0	$0	$0

Part and Line Number: **Part XI Line 9**

Explanation	Description	Amount
Net periodic postretirement benefit cost other than service cost	Net periodic postretirement benefit expense other than service cost components	$49,313.00
Net periodic pension benefit cost other than service cost	Net pension benefit cost apart from service-related cost	$(131,811.00)
Postretirement related changes other than net periodic postretirement costs	Postretirement-related changes excluding net periodic costs	$76,065.00
Pension related costs	Costs associated with pensions	$371,539.00

Part and Line Number: **Part XII Line 2(c)**

Audit of consolidated financial statements/oversight of audit; there was no change in the process for oversight of the audit from the prior year. The organization is audited as part of consolidated financial statements. It does not receive separate audited financial statements.

Part and Line Number: **Header - General**

During calendar year 2024, Council changed its fiscal year-end from February 29 to June 30. Its most recent prior Form 990 covered the short period from March 1, 2024 through June 30, 2024. As a result, the Prior Year column in this return reflects only four months of activity rather than a full year and is not comparable to the current reporting year.

Form **8453-TE**

Department of the Treasury
Internal Revenue Service

Tax Exempt Entity Declaration and Signature for Electronic Filing

For calendar year 2024, or tax year beginning JUL 01, 2024, and ending JUN 30, 20 25

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP
Go to *www.irs.gov/Form8453TE* for the latest information.

OMB No. 1545-0047

2024

Name of filer: NATIONAL 4-H COUNCIL

EIN or SSN: 36-2862206

Part I Type of Return and Return Information

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a,** or **10a** below, and the amount on that line of the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b,** or **10b,** whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	**Form 990** check here	☑	b	**Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	1b 47,459,546
2a	**Form 990-EZ** check here	☐	b	**Total revenue,** if any (Form 990-EZ, line 9)	2b
3a	**Form 1120-POL** check here	☐	b	**Total tax** (Form 1120-POL, line 22)	3b
4a	**Form 990-PF** check here	☐	b	**Tax based on investment income** (Form 990-PF, Part V, line 5)	4b
5a	**Form 8868** check here	☐	b	**Balance due** (Form 8868, line 3c)	5b
6a	**Form 990-T** check here	☐	b	**Total tax** (Form 990-T, Part III, line 4)	6b
7a	**Form 4720** check here	☐	b	**Total tax** (Form 4720, Part III, line 1)	7b
8a	**Form 5227** check here	☐	b	**FMV of assets at end of tax year** (Form 5227, Item D)	8b
9a	**Form 5330** check here	☐	b	**Tax due** (Form 5330, Part II, line 19)	9b
10a	**Form 8038-CP** check here	☐	b	**Amount of credit payment requested** (Form 8038-CP, Part III, line 22)	10b

Part II Declaration of Officer or Person Subject to Tax

11a ☐ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

b ☐ If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that ☑ I am an officer of the above named entity or ☐ I am the person subject to tax with respect to (name of entity) NATIONAL 4-H COUNCIL, (EIN) 36-2862206, and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund.

Sign Here	Jill Bramble	05/14/2026	President and CEO
	Signature of officer or person subject to tax	Date	Title, if applicable

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature	Date	Check if also paid preparer ☐	Check if self-employed ☐	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code				EIN / Phone no.

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ☐	PTIN
	Todd Teresco	Todd Teresco	05/14/2026		P01871563
	Firm's name BDO USA			Firm's EIN	13-5381590
	Firm's address 8401 Greensboro Drive, STE 800, Mclean, VA 22102.			Phone no.	(703) 893-0600