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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2011

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the **2011** calendar year, or tax year beginning **07-01-2011** and ending **06-30-2012**

- B** Check if applicable:
- ☒ Address change
 - ☐ Name change
 - ☐ Initial return
 - ☐ Terminated
 - ☐ Amended return
 - ☐ Application pending

C Name of organization
WILD BIRD FUND INC

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
565 COLUMBUS AVE NUL

City or town, state or country, and ZIP + 4
NEW YORK, NY 10024

F Name and address of principal officer
RITAMARY A MCMAHON
59 WEST 88TH STREET
NEW YORK, NY 10024

D Employer identification number

32-0915574

E Telephone number

(212) 724-7276

G Gross receipts \$ 551,901

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates 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.) ☐ 1947(a)(1) or ☐ 527

J Website: N/A

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

L Year of formation 2005

M State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities To Provide medical care and rehabilitation to native and passing migrant wildlife so that they can be released back to nature. The WBF is the only wildlife rehabilitation and education center in NYC, rehabilitating over 1500 sick, injured or orphaned animals a year.	
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)	4
4 Number of independent voting members of the governing body (Part VI, line 1b)	0
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	54,924
6 Total number of volunteers (estimate if necessary)	100
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	
8 Contributions and grants (Part VIII, line 1h)	487,450
9 Program service revenue (Part VIII, line 2g)	0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7c)	4
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	55,675
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	543,129
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	61,264
16a Professional fundraising fees (Part IX, column (A), line 11e)	0
b Total fundraising expenses (Part IX, column (D), line 25)	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	496,614
18 Total expenses—Add lines 13-17 (must equal Part IX, column (A), line 25)	557,878
19 Revenue less expenses—Subtract line 18 from line 12	-14,749
20 Total assets (Part X, line 16)	32,919
21 Total liabilities (Part X, line 26)	5,817
22 Net assets or fund balances—Subtract line 21 from line 20	27,102

Part II Signature Block

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

Sign Here	Signature of officer	Date	2013-02-11
	RITAMARY A MCMAHON PRESIDENT Type or print name and title		
Paid Preparer's Use Only	Preparer's signature	Date	Preparer's taxpayer identification number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4		Phone no.

THIS IS A COPY OF A LIVE DATA RETURN. OFFICIAL USE ONLY.

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☒ No

90-4

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

Wild Bird Fund, Inc

Employer identification number

32-0155774

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

-1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
<i>expenses for fundraising gala</i>										
(1) <i>Ritamarie McMahon</i>	☒		<i>7,742.00</i>	<i>4,742.00</i>		☒	☒			☒
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
Total ► \$										

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

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Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

Rita McMahon, president and director of the Wild Bird Fund, paid most of the bills for the fundraising gala on April 3rd, 2012. The attached accounting was approved by the board of directors. Payment of the balance due was made on 7-26-12.

Expenses and Income from April 3rd gala fundraiser

Bills paid by Rita McMahon

New York Beverage	cc	Beer & sodas	\$254.23
New York Beverage	cc	Beer & sodas	\$234.09
Columbus Spirits	cc	Wine	\$1,160.12
Pro Image Photo	cc	photo posters	\$435.27
Flick Dining	chk	caterer	\$5,330.00
Tenafly Nature	chk	raptor guests	\$328.00
Total Rita			\$7,741.71

Other costs paid by WBF

Printing for less	cc	brochures	\$356.34
1-800 Postcards	cc	piostcards	\$212.42
USPS	cc	stamps	\$376.00
Copy Door	cc	posters	\$66.00
Copy Door	cc	Event schedule	\$20.00
Total WBF			\$1,030.76

Total Expenses **\$8,772.47**

Income from April 3rd Fundraiser:

Eventbrite ticket sales	\$14,800.00
Door ticket sales	\$6,250.00
Silent Auction T-shirts	\$3,448.00
Wishlist	\$900.00
Donations matching Zofnass Grant	\$15,000.00
Original Zofnass Grant	\$10,000.00
Additional Zofnass Grant	\$5,000.00
Total Income	\$65,398.00