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
▶ Information about Form 990 and its instructions is at *www.IRS.gov/form990*

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

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

C Name of organization
NATIONAL WILDLIFE
REHABILITATORS ASSOCIATION

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
2625 CLEARWATER ROAD NO 110

City or town, state or province, country, and ZIP or foreign postal code
ST CLOUD, MN 563016278

D Employer identification number
37-1143442

E Telephone number
(320) 230-9920

G Gross receipts $ 301,008

F Name and address of principal officer
ELAINE THRUNE
2625 CLEARWATER ROAD NO 110
ST CLOUD, MN 563016278

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: ▶ WWW NWRAWILDLIFE ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1982 | **M** State of legal domicile IL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
PROVIDE EDUCATION, TRAINING, AND RESOURCES TO THOSE IN THE PROFESSION OF WILDLIFE REHABILITATION

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	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	8
6	Total number of volunteers (estimate if necessary)	6	202
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	2,325
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-755

Revenue / Expenses

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	57,088	64,889
9	Program service revenue (Part VIII, line 2g)	166,562	165,018
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	17,144	6,159
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	46,957	39,265
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	287,751	275,331
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	13,838	7,887
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)	124,743	126,737
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶4,700		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	113,392	134,105
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	251,973	268,729
19	Revenue less expenses Subtract line 18 from line 12	35,778	6,602

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	936,149	967,352
21	Total liabilities (Part X, line 26)	110,538	135,139
22	Net assets or fund balances Subtract line 21 from line 20	825,611	832,213

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

****** | 2016-08-02
Signature of officer | Date

ELAINE THRUNE BUSINESS MANAGER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
CHRISTINE M STANZ CPA	CHRISTINE M STANZ CPA			P01319765

Firm's name ▶ CLIFTONLARSONALLEN LLP | Firm's EIN ▶ 41-0746749

Firm's address ▶ 818 SECOND ST SO SUITE 320
WAITE PARK, MN 56387 | Phone no (320) 203-5500

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

PROVIDE EDUCATION, TRAINING, AND RESOURCES TO THOSE IN THE PROFESSION OF WILDLIFE REHABILITATION, INCLUDING ENVIRONMENTAL EDUCATION AND WILDLIFE MEDICINE

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 $ 81,092 including grants of $) (Revenue $ 36,940)

PUBLICATIONS, WEBSITE, EDUCATIONAL AND TRAINING MATERIALS(SEE SCHEDULE O)

4b (Code) (Expenses $ 72,138 including grants of $) (Revenue $ 92,953)

ANNUAL SYMPOSIUM(SEE SCHEDULE O)

4c (Code) (Expenses $ 60,992 including grants of $) (Revenue $ 72,065)

MEMBERSHIP BENEFITS(SEE SCHEDULE O)

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses $ 7,887 including grants of $ 7,887) (Revenue $)

4e **Total program service expenses** ▶ 222,109

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**	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	**2**	Yes	
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**		No
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**		No
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 Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	**5**		No
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**		No
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**		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	**8**		No
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**		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	**10**	Yes	
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**	Yes	
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**		No
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**		No
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**		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	**11e**		No
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**	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	**12a**	Yes	
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**		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	**13**		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	**14a**		No
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**		No
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**		No
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**		No
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**		No
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**		No
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**		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	**20a**		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	**20b**		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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		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	Yes	
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		No
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		No
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		No
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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
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		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

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**	3			
b	Enter the number of Forms W-2G included in 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**		
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**	8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .			**3b**	Yes	
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**		No
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**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
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**		No
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**		No
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**		No
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**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			**7f**		No
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**		
9a	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**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			**14b**		

Part VI Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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	1a	13			
	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 in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	13			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?			3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		No
6	Did the organization have members or stockholders?			6		No
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
a	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
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 in Schedule O*			9		No

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		No
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	Yes	
b	Describe in 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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in 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		No
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 ▶ MN , IL , AZ , AR , CT , KY , MD , MI , NM , OH , OR , PA , WA , CA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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 in Schedule O)

19 Describe in 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
▶BARBARA SUTO TREASURER 2625 CLEARWATER ROAD SUITE 110 ST CLOUD, MN 56301 (320) 230-9920

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 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 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ 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) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JANUARY BILL MEMBER	0 00	X						0	0	0
(2) JENNIFER CONVY MEMBER	3 04	X						0	0	0
(3) SHERRI COX MEMBER	1 75	X						0	0	0
(4) REBECCA DUERR MEMBER	0 77	X						400	0	0
(5) MICHELE GOODMAN SECRETARY	2 63	X		X				250	0	0
(6) RICHARD GRANT PRESIDENT	4 90	X		X				0	0	0
(7) LESLIE LATTIMORE VICE PRESIDENT	1 68	X		X				0	0	0
(8) DAVE MCRUER VICE PRESIDENT	1 27	X		X				0	0	0
(9) JENNY SCHLIEPS MEMBER	1 75	X						0	0	0
(10) RENEE SCHOTT MEMBER	1 17	X						0	0	0
(11) LISA SMITH VICE PRESIDENT	2 19	X		X				0	0	0
(12) KATHY STELFORD MEMBER	1 33	X						0	0	0
(13) BARBARA SUTO TREASURER	4 85	X		X				0	0	0
(14) ELAINE THRUNE PAST PRESIDENT	9 03	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	650	0	0

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

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
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		No
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		No

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

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

Part VIII **Statement of Revenue**

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

Contributions, Gifts, Grants and Other Similar Amounts

Line	Description			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated campaigns . .	1a					
b	Membership dues	1b					
c	Fundraising events	1c					
d	Related organizations . . .	1d					
e	Government grants (contributions)	1e					
f	All other contributions, gifts, grants, and similar amounts not included above	1f	64,889				
g	Noncash contributions included in lines 1a-1f $						
h	**Total.** Add lines 1a-1f . . . . ▶			64,889			

Program Service Revenue

Line	Description	Business Code	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2a	CONFERENCE	900099	92,953	92,953		
b	MEMBERSHIP	900099	72,065	72,065		
c						
d						
e						
f	All other program service revenue					
g	**Total.** Add lines 2a–2f . . . . ▶		165,018			

Other Revenue

Line	Description	(i)	(ii)	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶			6,159			6,159
4	Income from investment of tax-exempt bond proceeds . . ▶						
5	Royalties . . . . ▶						
		(i) Real	(ii) Personal				
6a	Gross rents						
b	Less rental expenses						
c	Rental income or (loss)						
d	Net rental income or (loss) . . . . ▶						
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory						
b	Less cost or other basis and sales expenses						
c	Gain or (loss)						
d	Net gain or (loss) . . . . ▶						
8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . .	a					
b	Less direct expenses . . .	b					
c	Net income or (loss) from fundraising events . . ▶						
9a	Gross income from gaming activities See Part IV, line 19 . . .	a					
b	Less direct expenses . . .	b					
c	Net income or (loss) from gaming activities . . . ▶						
10a	Gross sales of inventory, less returns and allowances .	a	53,533				
b	Less cost of goods sold . .	b	25,677				
c	Net income or (loss) from sales of inventory . . ▶			27,856	27,856		

Line	Miscellaneous Revenue	Business Code	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
11a	MISCELLANEOUS INCOME	900099	9,084	9,084		
b	ADVERTISING INCOME	511190	2,325		2,325	
c						
d	All other revenue					
e	**Total.** Add lines 11a–11d . . . . . . ▶		11,409			
12	**Total revenue.** See Instructions . . . . . ▶		275,331	201,958	2,325	6,159

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				
2	Grants and other assistance to domestic individuals See Part IV, line 22	5,787	5,787		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	2,100	2,100		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	650	650		
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	116,174	96,724	17,881	1,569
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	9,913	8,332	1,461	120
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	9,025		9,025	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	19,253	19,253		
12	Advertising and promotion	838		838	
13	Office expenses	32,704	27,383	5,294	27
14	Information technology				
15	Royalties				
16	Occupancy	11,460	10,736	724	
17	Travel	12,677	9,707	2,970	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,076	552	524	
23	Insurance	2,867	527	2,340	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	EVENTS	27,031	27,031		
b	PRINTING & PUBLICATIONS	13,906	11,660	33	2,213
c	MISCELLANEOUS	3,144	1,667	830	647
d	TAXES	124			124
e	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24e	268,729	222,109	41,920	4,700
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			84,746	1	88,851
	2	Savings and temporary cash investments			731,432	2	774,871
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			11,054	4	6,919
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			89,796	8	82,211
	9	Prepaid expenses and deferred charges			15,118	9	6,555
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	42,542			
	b	Less accumulated depreciation	10b	35,399	3,201	10c	7,143
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			802	15	802
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			936,149	16	967,352
Liabilities	17	Accounts payable and accrued expenses			12,690	17	9,540
	18	Grants payable				18	
	19	Deferred revenue			97,848	19	125,599
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				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				25	
	26	**Total liabilities.** Add lines 17 through 25			110,538	26	135,139
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			733,462	27	740,821
	28	Temporarily restricted net assets			82,149	28	81,392
	29	Permanently restricted net assets			10,000	29	10,000
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			825,611	33	832,213
	34	Total liabilities and net assets/fund balances			936,149	34	967,352

Part XI **Reconcilliation 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	275,331
2	Total expenses (must equal Part IX, column (A), line 25)	2	268,729
3	Revenue less expenses Subtract line 2 from line 1	3	6,602
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	825,611
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	832,213

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 in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	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	Yes	
	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	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single Audit Act and OMB Circular A-133?	3a		No
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 in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:
Software Version:
EIN: 37-1143442
Name: NATIONAL WILDLIFE REHABILITATORS ASSOCIATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 7,887 including grants of $ 7,887) (Revenue $)

GRANTS, SCHOLARSHIPS, AND PROFESSIONAL RECOGNITION AWARDSAS THE LEADER IN OUR FIELD, NWRA PROVIDES FINANCIAL SUPPORT AND DESERVED RECOGNITION TO THOSE DEDICATED TO QUALITY WILDLIFE CARE, TREATMENT, AND RELEASE, RECIPIENTS NEED NOT BE NWRA MEMBERS GRANTS THE NWRA GRANT PROGRAM IS UNIQUE IN ANNUALLY AWARDING SMALL GRANTS SPECIFICALLY TO THOSE WHO WORK WITH WILDLIFE RECIPIENTS PRESENT RESULTS OF THEIR WORK THROUGH NWRA PUBLICATIONS OR PRESENTATIONS AT ANNUAL SYMPOSIA SINCE 1984, NWRA HAS PROVIDED $106,887 FOR STUDIES TO IMPROVE THE FIELD AND CARE OF WILDLIFE NWRA FUNDS GRANTS DIRECTLY, A LIST OF RECIPIENTS IS POSTED ONLINE AT WWW NWRAWILDLIFE ORG SCHOLARSHIPS NWRA IS PLEASED TO USE DONOR CONTRIBUTIONS FOR SCHOLARSHIPS, WITH NINE SCHOLARSHIPS TOTALING $7,887 AWARDED IN 2015 SCHOLARSHIPS, RANGING FROM $150 TO $3,000, ASSISTED WITH ATTENDING THE ANNUAL SYMPOSIUM, PURCHASING RESOURCE MATERIALS, AND BUILDING OR RENOVATING CAGING USED FOR REHABILITATING WILDLIFE SINCE 1993, NWRA HAS AWARDED $68,765 IN SCHOLARSHIPS TO 130 INDIVIDUALS, A LIST OF RECIPIENTS FOR EACH SCHOLARSHIP IS POSTED ONLINE AT WWW NWRAWILDLIFE ORG AWARDS NWRA RECOGNIZES MEANINGFUL ADVANCES IN THE FIELD THROUGH THE LIFETIME ACHIEVEMENT, SIGNIFICANT ACHIEVEMENT, AND MARLYS BULANDER WORKING TOGETHER FOR WILDLIFE AWARDS THOSE WORKING IN THE FIELD ARE ENCOURAGED TO NOMINATE DESERVING INDIVIDUALS ANNUALLY ONE LIFETIME ACHIEVEMENT AWARD WAS PRESENTED IN 2015 SINCE 1984, NWRA HAS HONORED MORE THAN 59 OUTSTANDING INDIVIDUALS AND 5 ORGANIZATIONS THAT HAVE MADE MAJOR ADVANCES IN OUR FIELD FOR THE BENEFIT OF MANY REHABILITATORS AND COUNTLESS WILD ANIMALS A LIST OF RECIPIENTS FOR EACH AWARD IS POSTED ONLINE AT WWW NWRAWILDLIFE ORG

SCHEDULE A
(Form 990 or 990EZ)

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.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2015
Open to Public Inspection

Name of the organization
NATIONAL WILDLIFE
REHABILITATORS ASSOCIATION

Employer identification number
37-1143442

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 11, 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 or 990-EZ))

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 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)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

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 . . . . ______

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- 9 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)
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ. Cat No 11285F

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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
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)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) | 12 |

13 **First five 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 2015 (line 6, column (f) divided by line 11, column (f)) | 14 |

15 Public support percentage for 2014 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2015.** 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—2014.** 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—2015.** 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—2014.** 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 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	69,988	63,209	74,084	57,088	64,889	329,258
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	194,913	213,488	213,568	227,866	218,551	1,068,386
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	264,901	276,697	287,652	284,954	283,440	1,397,644
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	45,500	26,246	25,548	29,500	50,405	177,199
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	45,500	26,246	25,548	29,500	50,405	177,199
8 **Public support.** (Subtract line 7c from line 6)						1,220,445

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6	264,901	276,697	287,652	284,954	283,440	1,397,644
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,912	11,472	14,234	17,144	6,159	60,921
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	5,688	3,730	4,124	4,348	2,325	20,215
c Add lines 10a and 10b	17,600	15,202	18,358	21,492	8,484	81,136
11 Net income from unrelated business activities not included in 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)	8,657	12,661	10,420	8,839	9,084	49,661
13 **Total support.** (Add lines 9, 10c, 11, and 12)	291,158	304,560	316,430	315,285	301,008	1,528,441

14 **First five 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 2015 (line 8, column (f) divided by line 13, column (f))	15	79 850 %
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	80 060 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	5 310 %
18 Investment income percentage from **2014** Schedule A, Part III, line 17	18	6 180 %

19a **33 1/3% support tests—2015.** 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—2014.** 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 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of 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 (b) and (c) 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 11a or 11b in Part I, answer (b) and (c) 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 (b) and (c) 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 (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) 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 (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent 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 in line 7? *If "Yes," complete Part II 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 in line 9(a)) 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 in line 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b 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		
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 in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*	11c		

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

		Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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 in (2), 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 government entity (see instructions)

		Yes	No
2 Activities Test **Answer (a) and (b) 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 in (a) 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 (a) and (b) 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? *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 **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)	1		
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 1-1/2% 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 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 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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
[redacted]			
d From 2013. . . . . ____________			
e From 2014. . . . . ____________			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 $ ____________________			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c			
8 Breakdown of line 7			
[redacted]			
c Excess from 2013. . . . . ____________			
d From 2014. . . . . ____________			
e From 2015. . . . . ____________			

Part VI **Supplemental Information.**
Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME	MISCELLANEOUS INCOME - 2011 AMOUNT $ 8,657 2012 AMOUNT $ 12,661 2013 AMOUNT $ 10,420 2014 AMOUNT $ 8,839 2015 AMOUNT $ 9,084

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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.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
NATIONAL WILDLIFE
REHABILITATORS ASSOCIATION

Employer identification number
37-1143442

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 (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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 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 in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, 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 2(d) 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 SFAS 116 (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 SFAS 116 (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 SFAS 116 (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 are a 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 programs
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" to 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	10,000	10,000	10,000	10,000	10,000
b Contributions					
c Net investment earnings, gains, and losses	126	129	127	125	241
d Grants or scholarships					
e Other expenditures for facilities and programs	126	129	127	125	241
f Administrative expenses					
g End of year balance	10,000	10,000	10,000	10,000	10,000

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

a Board designated or quasi-endowment ▶

b Permanent endowment ▶ 100 000 %

c Temporarily restricted endowment ▶

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)		No
(ii) related organizations	3a(ii)		No
b If "Yes" on 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' to 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				
b Buildings				
c Leasehold improvements				
d Equipment		42,542	35,399	7,143
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				7,143

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		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

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
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

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
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

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
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

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 FIN 48 (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	275,331
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	0
3	Subtract line **2e** from line **1**			3	275,331
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	0
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	275,331

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	268,729
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	0
3	Subtract line **2e** from line **1**			3	268,729
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	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	268,729

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

Return Reference	Explanation
PART V, LINE 4	THE $10,000 PRINCIPAL IS MAINTAINED FOR PERPETUITY WITHOUT ENCROACHMENT INCOME EARNED ON THE PRINCIPAL IS AVAILABLE FOR USE IN ANY MANNER BY THE ORGANIZATION
PART X, LINE 2	THE ASSOCIATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND CORRESPONDING STATE TAX CODES THE ASSOCIATION IS NOT A PRIVATE FOUNDATION AND CONTRIBUTIONS TO THE ASSOCIATION QUALIFY AS A CHARITABLE TAX DEDUCTION BY THE CONTRIBUTOR THE ASSOCIATION IS SUBJECT TO UNRELATED BUSINESS INCOME TAX WITH RESPECT TO ADVERTISING INCOME THE ASSOCIATION'S INCOME TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES IN ACCORDANCE WITH PRESCRIBED STATUTES

Part XIII **Supplemental Information** ***(continued)***

Return Reference	Explanation

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.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
NATIONAL WILDLIFE REHABILITATORS ASSOCIATION

Employer identification number
37-1143442

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

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

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

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

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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) SCHOLARSHIPS	7	5,687			
(2) RECOGNITION AWARD	1	100			

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

Return Reference	Explanation
PART I, LINE 2	SCHOLARSHIPS ARE PROVIDED ANNUALLY USING DONATIONS DESIGNATED FOR SUCH USE, WHILE GRANT AWARDS ARE DETERMINED ANNUALLY BY THE BOARD OF DIRECTORS REGARDING ELIGIBLITY, NWRA HAS PUBLISHED CRITERIA ON ITS WEBSITE FOR SCHOLARSHIP AND GRANT AWARDS ALL APPLICANTS MUST COMPLETE AN APPLICATION FORM AND PROVIDE REQUIRED INFORMATION AND REFERENCE LETTERS APPLICANTS WHO DO NOT MEET BASIC REQUIREMENTS, OR WHO FILE AN INCOMPLETE APPLICATION, ARE REJECTED NWRA COMMITTEE MEMBERS REVIEW ELIGIBLE APPLICATIONS AND RATE APPLICANTS ON A FORM PROVIDED ACCORDING TO STATED CRITERIA NUMERICAL RATINGS ARE COMPILED AND THE NUMBERS PROVIDE A RANKING OF APPLICANTS THE HIGHEST RANKINGS RECEIVE AWARDS REGARDING MONITORING, SCHOLARSHIPS ARE CLOSELY MONITORED BY NWRA SCHOLARSHIPS USED TO HELP DEFRAY COSTS OF SYMPOSIUM ATTENDANCE ARE AWARDED AT THE SYMPOSIUM, THEREFORE, IF THE AWARDEE DOES NOT ATTEND, THEY DO NOT RECEIVE THE SCHOLARSHIP ALSO, GRANT RECIPIENTS ARE REQUIRED TO GIVE NWRA REPORTS AND TO PUBLISH FINDINGS IN A SIGNED AGREEMENT, THEY ARE REQUIRED TO RETURN THE FUNDS TO NWRA IF THE PROJECT DOES NOT TAKE PLACE

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SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
NATIONAL WILDLIFE REHABILITATORS ASSOCIATION	37-1143442

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	EDUCATIONAL PUBLICATIONS, WEBSITE, COURSES, AND TRAINING MATERIALS NWRA IS RECOGNIZED FOR PUBLISHING ONE-OF-A-KIND, HIGH QUALITY VOLUMES WITH CURRENT, PROFESSIONALLY REVIEWED INFORMATION PERTINENT TO THE FIELD FOR WILDLIFE REHABILITATORS, EDUCATORS, AND VETERINARIANS THE PRIMARY FOCUS IS WILDLIFE CARE AND REHABILITATION WITH THE GOAL OF RELEASING HEALTHY ANIMALS INTO APPROPRIATE HABITAT PRODUCTION OF NWRA PUBLICATIONS IS COMPLETED WITH QUALIFIED VOLUNTEER EDITORS, AUTHORS, CONTRIBUTORS, REVIEWERS, PROOFREADERS, LAYOUT PERSONS, ARTISTS, AND GRAPHIC SUBMISSIONS SKILLED AND KNOWLEDGEABLE INDIVIDUALS ARE SELECTED TO BRING HIGH QUALITY PUBLICATIONS TO PRINT AND AVAILABLE FOR PURCHASE NOMINAL PRICING FOSTERS AND PROMOTES SELF-EDUCATION AND BUILDS FACILITY REFERENCE LIBRARIES NWRA ARTICLE REPRINTS ARE AVAILABLE FOR $1 TO $5 EACH AND LARGE, IN-DEPTH VOLUMES ARE ONLY $75 PUBLICATIONS ARE LISTED IN THE WEBSITE MARKETPLACE IN 2015, NWRA LAUNCHED A NEW WEBSITE WITH THE POTENTIAL TO GREATLY EXPAND CONTENT AND ACCESSIBILITY, AND BETTER SERVE ANYONE WISHING TO LEARN MORE ABOUT WILDLIFE RESCUE, REHABILITATION, AND RELEASE THE SITE, WWW NWRAWILDLIFE ORG, IS DESIGNED AND MAINTAINED TO FUNCTION AS A RESOURCE, NOT ONLY FOR MEMBERS, BUT ALSO FOR THE PUBLIC OR CASUAL BROWSERS SEEKING INFORMATION ON THE PROFESSION, ASSISTANCE WITH INJURED WILDLIFE, OR NWRA ITSELF FUNDING FOR CONTINUED WEBSITE MAINTENANCE AND IMPROVEMENT WAS PROVIDED BY THE BARKLEY FUND SINCE 1999, THE NWRA WILDLIFE MEDICINE COURSE HAS BEEN TAUGHT AT VETERINARY SCHOOLS ACROSS THE US AND CANADA, PROACTIVELY EXPOSING VETERINARY STUDENTS TO THE CONCEPT OF HUMANE CARE FOR WILDLIFE AND BASIC APPROACHES TO WILDLIFE STABILIZATION AND MEDICAL TREATMENT VETERINARY STUDENTS ARE PROVIDED WITH INTENSE DIDACTIC AND HANDS-ON TRAINING BY EXPERIENCED WILDLIFE VETERINARIANS IN A VARIETY OF PRACTICAL TOPICS IN WILDLIFE MEDICINE, INCLUDING SPECIAL MODIFICATIONS NECESSARY FOR MANY WILDLIFE SPECIES IF THEY ARE TO SURVIVE AND BE RELEASED FUNDING FOR COURSES IS PROVIDED BY A GRANT FROM THE KENNETH A SCOTT CHARITABLE TRUST EXAMPLES OF NWRA PUBLICATIONS AND EDUCATIONAL AND TRAINING MATERIALS INCLUDE 1 ANSWERING THE CALL OF THE WILD, A HOTLINE OPERATOR'S GUIDE TO HELPING PEOPLE AND WILDLIFE THIS ULTIMATE GUIDE FOR HANDLING CALLS ABOUT WILDLIFE EMERGENCIES HAS MORE THAN 500 PAGES OF WELL-ORGANIZED INFORMATION NEEDED TO SET UP AND OPERATE AN EFFECTIVE WILDLIFE HOTLINE AN ENORMOUS RANGE OF INFORMATION IS ESSENTIAL FOR THOSE UNDERTAKING THE DAUNTING TASK OF PROVIDING HUMANE AND BIOLOGICALLY APPROPRIATE RESPONSES TO WILDLIFE EMERGENCIES ADVICE OFFERED DEMONSTRATES A BROAD UNDERSTANDING OF WILDLIFE BEHAVIOR AND PROBLEMS, AND RECOMMENDATIONS ARE AIMED AT MINIMIZING HUMAN INTERFERENCE WITH WILDLIFE EXCEPT IN CASES OF GENUINE EMERGENCY IT IS DESIGNED FOR WILDLIFE REHABILITATORS, ANIMAL CONTROL AGENCIES, ANIMAL RESCUE ORGANIZATIONS, NATURE CENTERS, PARKS, AND ANY TELEPHONE SERVICE THAT RECEIVES CALLS ABOUT WILDLIFE THEY ENDEAVOR TO ANSWER 2 PRINCIPLES OF WILDLIFE REHABILITATION THE ESSENTIAL GUIDE FOR NOVICE AND EXPERIENCED REHABILITATORS STILL RECOGNIZED AS THE PREMIER TEXTBOOK IN OUR FIELD, THIS BOOK CONTINUES TO BE USED WIDELY AS A TRAINING MANUAL FOR NOVICE WILDLIFE REHABILITATORS AND VOLUNTEERS, THE PRIMARY TEXT FOR COLLEGE AND UNIVERSITY CLASSES, AS WELL AS BEING A RELIABLE REFERENCE MANUAL MORE THAN 7,500 ARE IN CIRCULATION IN OUR UNIQUE FIELD THIS 667-PAGE INDEXED VOLUME IS PRODUCED AND PUBLISHED BY NWRA AND IS THE ONLY PUBLICATION AVAILABLE THAT ENCOMPASSES ESSENTIAL ASPECTS OF WILDLIFE REHABILITATION, INCLUDING CONTACT INFORMATION FOR AGENCIES, ORGANIZATIONS, AND PRODUCT VENDORS NEEDED BY WILDLIFE REHABILITATORS 3 MINIMUM STANDARDS FOR WILDLIFE REHABILITATION THIS PEER-REVIEWED STANDARD OF MINIMUM REQUIREMENTS TO PROVIDE APPROPRIATE CARE FOR WILDLIFE IN TEMPORARY CAPTIVITY HAS BEEN ADOPTED INTO PERMITTING AND LICENSING REGULATIONS BY SEVERAL STATE AGENCIES AND THE US FISH & WILDLIFE SERVICE THE FOURTH EDITION INCLUDES 50 PAGES OF NEW AND UPDATED MATERIAL, AND CONTINUES TO ACHIEVE WIDESPREAD DISTRIBUTION THE CANADIAN WILDLIFE SERVICE IS CURRENTLY TRANSLATING THIS BOOK INTO FRENCH FOR USE BY THEIR AGENCY 4 THE POPULAR QUICK REFERENCE, IS A COMPACT REFERENCE MANUAL OF BASIC AND FREQUENTLY USED INFORMATION SUITABLE FOR ALL EXPERIENCE LEVELS THE EASY-TO-USE FORMAT CONTAINS CALCULATIONS, CONVERSION FACTORS, MANY USEFUL TABLES AND CHARTS, AND A GLOSSARY OF MEDICAL, BIOLOGICAL, AND REHABILITATIVE TERMS 5 SONGBIRD DIET INDEX A GUIDE TO THE NATURAL FOOD HABITS OF OHIO SONGBIRDS AND SUBSTITUTE DIETS FOR USE IN WILDLIFE REHABILITATION FACILITIES THIS VALUABLE REFERENCE LISTS SPECIES FOUND EAST OF THE ROCKY MOUNTAINS, AND PROVIDES RESOURCES TO SELECT HEALTHY NATURAL INSECT AND PLANT FOODS FOR THE OPTIMUM GROWTH, DEVELOPMENT, AND RECOVERY OF WILDLIFE REHABILITATION PATIENTS 6 WILDLIFE IN EDUCATION A GUIDE FOR THE CARE AND USE OF PROGRAM ANIMALS AND INTRODUCTION TO WILDLIFE EDUCATION PROGRAMMING TIPS & TECHNIQUES FOR BETTER PRESENTATIONS BOTH BOOKS, CURRENTLY UNDERGOING REVISIONS, ARE COMPILED AND PUBLISHED BY EXPERIENCED AND HIGHLY REGARDED EDUCATORS THEY ARE THE FIRST PUBLICATIONS AVAILABLE WITH A COMPREHENSIVE APPROACH TO LONG-TERM CARE OF CAPTIVE EDUCATIONAL WILDLIFE AND TO DEVELOPING EFFECTIVE AND MEANINGFUL PROGRAMS ON WILDLIFE EDUCATION, PRESERVATION, AND ECOSYSTEM AWARENESS 7 NWRA WILDLIFE MEDICINE COURSE NATIONALLY RECOGNIZED INSTRUCTORS ARE LICENSED VETERINARIANS WITH EXTENSIVE EXPERIENCE TREATING WILDLIFE PATIENTS THIS GROUNDBREAKING COURSE PROVIDES OPPORTUNITIES FOR PROFESSIONAL STUDENTS IN ACCREDITED VETERINARY SCHOOLS TO GAIN FORMAL TRAINING IN MEDICINE, SURGERY, AND CAPTIVE MANAGEMENT OF NATIVE WILDLIFE SPECIES IT MEETS A RECOGNIZED NEED IN VETERINARY TRAINING, AS MOST TRADITIONAL VETERINARY CURRICULA EXCLUDE OR MINIMIZE INSTRUCTION IN WILDLIFE MEDICINE THIS IS IN CONTRAST TO THE SUBSTANTIAL INTEREST OF STUDENTS TO LEARN MORE ABOUT THIS SPECIALIZED FIELD IN ADDITION TO HANDS-ON SKILLS, THE TRAINING PROVIDED BY THIS COURSE ALSO PREPARES STUDENTS TO WORK BETTER WITH WILDLIFE REHABILITATORS ONCE THEY BECOME PRACTICING VETERINARIANS, RESULTING IN OPTIMAL MEDICAL MANAGEMENT DURING THE REHABILITATION PROCESS THE TWO-DAY COURSE HAS BEEN PRESENTED 24 TIMES AT 16 DIFFERENT VETERINARY SCHOOLS, AND HAS SERVED AN ESTIMATED 1,069 VETERINARY STUDENTS

Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	ANNUAL SYMPOSIUM NWRA'S ANNUAL NATIONAL SYMPOSIUM CONTINUES TO BE THE LARGEST AND MOST COMPREHENSIVE PROFESSIONAL TRAINING AND DEVELOPMENT EVENT IN THE FIELD THE 33RD SYMPOSIUM HELD IN PRINCETON, NJ, WAS ATTENDED BY 459 PEOPLE FROM 39 STATES, 4 CANADIAN PROVINCES, INDIA, AND GUAM FOUR-DAY MEMBER GENERAL REGISTRATION WAS A NOMINAL $125, THE LOW COST IS DESIGNED TO ENABLE ATTENDANCE FOR MANY MEMBERS WHO ARE SELF-FUNDED AND/OR RELY ON DONATIONS FIVE DAYS OF CONCURRENT PROGRAMMING, INCLUDING A FIFTH DAY OF TARGETED 8-HOUR SEMINARS, OFFERED IN EXCESS OF 150 HOURS OF EDUCATION AND SKILLS TRAINING PRESENTED BY MORE THAN 90 SPEAKERS AND LAB INSTRUCTORS TWO TARGETED 8-HOUR SEMINARS ON BASIC WILDLIFE REHABILITATION AND CLINICAL DIAGNOSTIC TECHNIQUES, AND 14 HANDS-ON SKILLS DEVELOPMENT WORKSHOPS, MOST PRECEDED BY A PRE-REQUISITE LECTURE, PROVIDED SUPERVISED PRACTICAL EXPERIENCE ANOTHER 8-HOUR SEMINAR FOCUSED ON BUILDING AND ENHANCING YOUR PUBLIC EDUCATION AND OUTREACH THE POSTER SESSION DISPLAYED STUDIES NOT PRESENTED ELSEWHERE STATE VETERINARY BOARDS AND NATURAL RESOURCE DEPARTMENTS, AS WELL AS FEDERAL MIGRATORY BIRD OFFICES, APPROVE SYMPOSIUM PRESENTATIONS FOR CONTINUING EDUCATION CREDITS REQUIRED OF PRACTICING VETERINARIANS, VETERINARY TECHNICIANS, AND LICENSED WILDLIFE REHABILITATORS AS WITH OTHER NWRA PROGRAMS, VOLUNTEERS PLAY A KEY ROLE IN ENSURING EACH ANNUAL SYMPOSIUM IS SUCCESSFUL AND AFFORDABLE FOR ATTENDEES NWRA RECORDED 134 VOLUNTEERS WORKING MORE THAN 4,000 HOURS TOWARD THE SUCCESS OF SYMPOSIUM 2015 THE VOLUNTEER SYMPOSIUM, PROGRAM, AND WORKSHOP COORDINATORS ALL WORK YEAR-ROUND TO PLAN AND SECURE THE SITE, HOTEL, SPEAKERS, WORKSHOP SUPPLIES, FIELD TRIPS, EVENING BANQUET, ICEBREAKER RECEPTION, AND EVERYTHING THAT OCCURS DURING THE WEEK-LONG EVENT DURING THE SYMPOSIUM, TRAINED VOLUNTEERS STAFF THE REGISTRATION/INFORMATION DESK AND THE AV TEAM, AND SERVE AS SPEAKERS, MODERATORS, WORKSHOP INSTRUCTORS, AND ASSISTANTS SINCE 1982, NWRA HAS PRODUCED 33 NATIONAL SYMPOSIA IN 22 DIFFERENT STATES, CUMULATIVE ATTENDANCE EXCEEDS 13,300 PEOPLE VIEW INFORMATION ON PAST AND FUTURE SYMPOSIA ONLINE AT WWW NWRAWILDLIFE ORG IN THE SYMPOSIUM SECTION AND IN ANNUAL REPORTS

Return Reference	Explanation
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	MEMBERSHIP BENEFITS NWRA PROVIDES UPDATED RESOURCES TO SUSTAIN THE EFFORTS OF DEDICATED WILDLIFE REHABILITATORS AND VETERINARIANS WHO CARE FOR INJURED WILD ANIMALS, AND THOSE WHO EDUCATE CONCERNED CITIZENS ABOUT WILDLIFE BEHAVIOR AND SURVIVAL MEMBER BENEFITS FOCUS ON THE ASSOCIATION'S MISSION OF IMPROVING AND PROMOTING THE PROFESSION OF WILDLIFE REHABILITATION AND ITS CONTRIBUTIONS TO PRESERVING NATURAL ECOSYSTEMS INFORMATION AND RESOURCES HELP MEMBERS IMPROVE WILDLIFE CARE AND RELEASE, MORE TIMELY AND EFFECTIVELY RESPOND AND EDUCATE THE PUBLIC IN WILDLIFE SITUATIONS OR ENCOUNTERS, AND BETTER MANAGE TIME, FUNDS, RESOURCES, VOLUNTEERS, AND STAFF NWRA EMPLOYS A PART-TIME EDITOR FOR MEMBERSHIP BENEFIT PUBLICATIONS, BUT ALL AUTHOR MANUSCRIPTS AND OTHER CONTENT, REVIEWING, PROOFREADING, COVER ARTWORK, AND LAYOUT OF PUBLICATIONS IS ACCOMPLISHED BY SKILLED VOLUNTEERS MEMBERS RECEIVE BENEFITS FOR A NOMINAL $50 FOR INDIVIDUAL ANNUAL DUES FAMILY MEMBERSHIPS, REDUCED RATE STUDENT MEMBERSHIPS, AND LIFETIME MEMBERSHIPS ALSO ARE AVAILABLE MEMBER BENEFITS INCLUDE 1 WILDLIFE REHABILITATION BULLETIN-48 TO 52 PAGE SEMI-ANNUAL PEER-REVIEWED JOURNAL WITH WILDLIFE CARE, MEDICAL ARTICLES, AND NEW DISCOVERIES WITHIN THE FIELD, 2 TWICE MONTHLY EMAILS CONVEYING CRITICAL NEWS, SUCH AS DISEASES OF CONCERN (AVIAN INFLUENZA, RABIES AND OTHER ZOONOSES, BAT WHITE-NOSE SYNDROME, DISTEMPER), PERTINENT INFORMATION FROM THE AMERICAN VETERINARY MEDICAL ASSOCIATION AND THE US FISH & WILDLIFE SERVICE, AVAILABILITY OF RESOURCES, AND TIME-SENSITIVE ANNOUNCEMENTS, 3 WEBSITE MEMBER-ONLY SECTION FOR FINDING RESOURCES AND NETWORKING WITH OTHER MEMBERS, 4 ACCESS TO INSURANCE PLANS SPECIFICALLY DESIGNED TO COVER THE UNIQUE ACTIVITIES AND REQUIREMENTS OF WILDLIFE REHABILITATORS, 5 MEMBERSHIP DIRECTORY-ANNUAL LISTING OF MEMBERS WILLING TO NETWORK, USED AS A RESOURCE FOR OBTAINING ADVICE, ASSISTANCE, AND FOR WILDLIFE PATIENT TRANSFERS, 6 THE WILDLIFE REHABILITATOR-12 TO 16 PAGE SEMI-ANNUAL NEWSLETTER WITH ASSOCIATION NEWS, PERTINENT INFORMATION FROM RELATED FIELDS, AND OPPORTUNITIES, SUCH AS SCHOLARSHIPS AND SMALL GRANTS AVAILABLE, 7 DISCOUNTS ON PURCHASES OF ALL NWRA EDUCATIONAL PUBLICATIONS AND MATERIALS, AND, 8 DISCOUNTS ON ANNUAL SYMPOSIUM REGISTRATION

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE BUSINESS AND AFFAIRS OF THE ASSOCIATION SHALL BE MANAGED BY THE EXECUTIVE COMITTEE OF THE BOARD OF DIRECTORS THE EXECUTIVE COMMITTEE MAY EXERCISE ALL SUCH POWERS OF THE ASSOCIATIONS AS ARE NOT BY BY-LAW OR BY THE ARTICLES OF INCORPORATION DIRECTED OR REQUIRED TO BE EXERCISED BY THE FULL BOARD OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE ORGANIZATION'S FOUR-PERSON INTERNAL AUDIT TEAM PERFORMS AN INITIAL THOROUGH REVIEW OF THE STATE AND FEDERAL TAX RETURNS COPIES OF ALL RETURNS ARE THEN SENT TO THE FULL BOARD FOR REVIEW AND APPROVAL ONCE COMPLETED AND PRIOR TO SUBMISSION TO AUTHORITIES THE BOARD VOTES TO APPROVE ALL RETURNS AS PREPARED

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL BOARD MEMBERS AND STAFF (CENTRAL OFFICE MANAGER, PUBLICATIONS MANAGER) SIGN A CONFLICT OF INTEREST (COI) FORM ANNUALLY AND ALL FORMS ARE REVIEWED BY THE BUSINESS MANAGER ANNUALLY COI STATEMENTS ARE REQUESTED FROM ANYONE WITH A CONNECTION TO OR IN POSITION TO INFLUENCE, OR WHERE PERSONAL OR BUSINESS GAIN IS POSSIBLE BOARD MEMBERS AND STAFF ARE AWARE OF THE COI IMPORTANCE AND ANYONE CAN QUESTION ANOTHER ABOUT A POSSIBLE COI DURING BOARD MEETINGS OR IN SUPERVISOR AND EMPLOYEE/VOLUNTEER INTERACTIONS BOARD MEMBERS OPENLY DISCLOSE A POSSIBLE CONFLICT DURING MEETINGS TO INFORM OTHER MEMBERS IF A CONFLICT IS IDENTIFIED, THE PERSON IS ASKED TO LEAVE THE ROOM DURING DISCUSSION AND ABSTAIN FROM VOTING ON THE ISSUE OR BUSINESS ITEM SUCH DETERMINATION AND ACTION WOULD BE RECORDED IN THE MINUTES NO COI HAVE BEEN DISCOVERED AFTER A TRANSACTION HAS OCCURRED A COI IS DETERMINED BY THE BUSINESS MANAGER, PRESIDENT, AND/OR EXECUTIVE COMMITTEE RESTRICTIONS INCLUDE EXCLUSION FROM ANY DECISION-MAKING PROCESS, FINANCIAL PROCESS (I E., HANDLING FUNDS), AND SUPERVISION OR APPROVAL OF RELATED WORK IN PROGRESS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	PRESIDENT IS A NON-COMPENSATED POSITION NO CEO OR ED ON STAFF

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
PART XII, LINE 2C	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE AUDIT THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR