	•	1	-		2	9493	3141:		
Form	99	0 Return of Org	anization Exem	pt From	Incor	ne Tax		3 No 1545-0	
) Depart	tment of the	Under section 501(c), 527, o Do not enter social	r 4947(a)(1) of the Internal Rev security numbers on this f ov/Form990 for instructions	orm as it may	be made	public.	Ope	2017 en to Pul Ispectio	blic
		017 calendar year, or tax year beginnin		, and e	ending				
Ē	heck if app ddress cha		vil Rights Defense Fund			D Employer	dentification n	Imper	
	ame chang	Number and street (or P O box if ma	I is not delivered to street address	Room/suite		52-1136665			
	•	* 11250 Waples Mill Road City or town	State	ZIP code		E Telephone	number		
	itial return	Fairfax	VA	22030		(703) 267-10	00		
	nal return/teri	Foreign country name	oreign province/state/county	Foreign posta	al code			4.0	
	mended ref		<u></u>		┯┅╼╍┛	G Gross recei	·		50,397
Ap	pplication p	ending F Name and address of principal officer Craig B Spray 11250 Waples M				s a group return fo all subordinates		Yes Yes	
	x-exempt s) ◀ (insert no) 4947(a)(1) or 527	もつ		(see instruction		No
		www.nradefensefund.org) (insert ito) 4547(a		۲J	up exemption nu		-,	
	rm of organ				ar of forma		M State of leg	al domicite	 \/A
	rt I	Summary				1970			VA
		efly describe the organization's mission	on or most significant activi	ties To v	oluntaril	y assist in the	e preservatio	n	
nce	ar	d defense of human, civil, and constitu	utional rights of individuals	to keep and be	ear arms				
erna		a free society							
Activities & Governance		neck this box ► I if the organization umber of voting members of the govern	n discontinued its operatio	ns or disposed	l of more	than 25% of	its net asse	ts	10
8		Imber of independent voting members		rt VI, line 1b)		F	4	···-	<u>10</u> 10
ities		tal number of individuals employed in				Ľ	5		C
ŝ		tal number of volunteers (estimate if n	• •			-	6		10
<		Ital unrelated business revenue from F It unrelated business taxable income f		2		-	7a 7b		0
-+	D IN	t unrelated business taxable income i		EIVED ,	1	Prior Year		urrent Year	
e		ontributions and grants (Part VIII, line 1	h)		1	1,457,	672	73	33,587
Revenue		ogram service revenue (Part VIII, line		i c			0		0
Ře	44 0	/estment income (Part VIII, column (A) her revenue (Part VIII, column (A), line		10	} _−−	106,	14	16	63,859 1
	12 To	tal revenue-add lines 8 through 11 (mus	t equal Part VIII, column (A)	line 12)	ŧ.	1,564,		89	97,447
		anto ana omniar amoanto pala (r arciv	Colonin (* Missin and Mission		-	534,	534	1,32	22,859
		nefits paid to or for members (Part IX,		00 5 10)	ļ		0		0
ses		laries, other compensation, employee be ofessional fundraising fees (Part IX, co		ies J-10)			0		0
Expenses		tal fundraising expenses (Part IX, colu		1,105					
		her expenses (Part IX, column (A), line				111,			16,063
		tal expenses Add lines 13-17 (must e		ne 25)		646,3			38,922
	<u>19 Re</u>	venue less expenses Subtract line 18		<u> </u>	Beginnii	917,5 ng of Current Y		-54 ind of Year	41,475
sets alanc	20 To	tal assets (Part X, line 16)				7,085,			76,603
561		tal liabilities (Part X, line 26)				325,3			47,703
Part		t assets or fund balances Subtract lin Signature Block	e 21 from line 20		J	6,760,	169	6,72	28,900
		perjury, I declare that I have examined this return	, including accompanying schedul	es and statements	, and to the	best of my know	vledge	···-··	
		e, correct, and complete Declaration of preparer	-				ge		
Sign		Signature of officer					11/5/20	118	
Here	·	Craig B Spray		Trea	surer	Date			
		Type or print name and title							
		Print/Type preparer's name	Preparer's signature		Date	Che		TIN	
Paid		Zack Fortsch	3 with furtist	<u>ر</u>	11/5			00052725	<u>ن</u>
		Firm's name RSM US LLP			I	Firm's EIN 🕨 4			
	Univ		to 900 Chicago II 60606			Phone no 3	12-634-3400	۰ <u>– </u>	
Prepa Use (Uniy	Firm's address One South Wacker S	te 600, Chicago, IL 60606		<u>L'</u>		12 004 0400	,	
Use (-	I Firm's address ► One South Wacker S iscuss this return with the preparer sh		ns)	L <u>'</u>		<u>x</u>		No

- . -

Form 9	90 (2017)	NRA Civil Rights Defe	nse Fund			52-	1136665	Page 2
<u>,</u> Pa	rt III	Statement of Program			ne in this Part III .			
1	Briefly d	escribe the organization's m	ission:		·			
		d provides legal and financi						
		g their right to keep and be						
	and edu	cation on a wide variety of g	un-related issues, i	ncluding the meaning	of the Second			
	Amendn							
2		organization undertake any	significant program	services during the ye	ear which were not l	isted on		
	-	Form 990 or 990-EZ? .			• •	• • •	Yes	X No
-		describe these new service						
3		organization cease conducti	ng, or make signific	ant changes in how it	conducts, any prog	ram		
	Services						Yes	X No
4		describe these changes on the organization's program		monto for oach of ito	three lorgest progra	m convisor or r	nonsured by	
4		s Section 501(c)(3) and 50						
		expenses, and revenue, if a			it the amount of gra			
4a	(Code			including grants of S) (Revenue \$)
		or legal assistance for the re						
		elated to the preservation o Il to keep and bear arms						
						•••••		
				•••••	••••			
4b	(Code) (Expenses	\$ 88,030) including grants of \$	\$ 78,090) (Revenue \$)
		nd awards for legal researc				g of		
		nd Amendment and nature	of the right to keep	and bear arms provisi	ions in state			
	constitut	ions						
					••••••			
						•••••		
					••••••			
4c	(Code) (Expenses	\$	_ including grants of \$	\$) (Revenue \$ _)
								
				•				
								.
			-					
4d		ogram services. (Describe ii		•			• •	
	(Expense		including grants of		0)(Revenue \$		0)	
<u>4e</u>	lotal pro	gram service expenses	<u> </u>	1,332,859				

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Form	990 (2017) NRA Civil Rights Defense Fund	52-11366	65	P	age 3
Part					
				Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	l			
	complete Schedule A		1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? .		2	Х	
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		x
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		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	•••			<u> </u>
v	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,				
	Part III	í	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	••••	5		<u> </u>
U	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If				Ι.
			c		
-		•	6	-	<u> </u>
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	-	<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		_		
_	complete Schedule D, Part III	•	8	X	<u> </u>
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 de	ot			l
	negotiation services? If "Yes," complete Schedule D, Part IV	••	9		X
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	X	L
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.		· · · · · · · · · · · ·		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete				
	Schedule D, Part VI	•••	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more				l
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		11b		X
С	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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets				ĺ
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		11d	Х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Pa	πX	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," comp	olete			
	Schedule D, Parts XI and XII.		12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "	′es,"		_	
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional .		12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		14a		X X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,				
	fundraising, business, investment, and program service activities outside the United States, or aggregate				
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or				
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		-13		
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		16		x
47			16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		4-		v
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on				~
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.		18		<u> </u>
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	<u> </u>	19		<u> </u>

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Form,	090 (2017) NRA Civil Rights Defense Fund	52-1136665	Р	age 4
Par	IV Checklist of Required Schedules (continued)		r	.
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	. 20b		<u> </u>
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	X	
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	X	
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	<u> </u>	
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	<u>24a</u>		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	0.5		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	. <u>25a</u>		X
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	254		
•••	990-EZ? If "Yes," complete Schedule L, Part I.	. 25b		X
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	26		x
07	disqualified persons? If "Yes," complete Schedule L, Part II.	20		<u>├</u>
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	x	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21		<u> </u>
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.			X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		Ê
	Schedule L, Part IV	. 285		x
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 .	. 28 c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M.	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
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		X
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		X
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	Х	Ļ
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		L
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	X	<u> </u>
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		<u> </u>
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	X	(2017)

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Form	990	(2017)
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Form 9	90 (2017)	NRA Civil Rights Defense Fund		52-1136	665	Pa	_{age} 5
Par	t 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 th	ne number reported in Box 3 of Form 1096 Enter -0- if not applicable .	1a	30			
b	•	ne number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the	organization comply with backup withholding rules for reportable payments to vendors and re	eportable				İ
	gaming	(gambling) winnings to prize winners?			1c	X	
2a	Enter th	ne number of employees reported on Form W-3, Transmittal of Wage and Tax		Γ			
	Statem	ents, filed for the calendar year ending with or within the year covered by this return.	2a	0			
b	If at lea	st one is reported on line 2a, did the organization file all required federal employment tax retu	irns? .	[2b		
		the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	ns)				
3a		organization have unrelated business gross income of \$1,000 or more during the year?		L	<u>3a</u>		X
b		has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule		· ·	<u>3b</u>		L
4 a		ime during the calendar year, did the organization have an interest in, or a signature or other					
		financial account in a foreign country (such as a bank account, securities account, or other fin	nancial				
	accoun	-	•	· · -	<u>4a</u>		X
b		enter the name of the foreign country.					
		tructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial.	Accounts				
-	(FBAR)						
5a		e organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X
b	-	taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	iction?	· -	5b		Х
с 6а		to line 5a or 5b, did the organization file Form 8886-T?	 ha	· -	<u>5c</u>		
Vđ		e organization have annual gross receipts that are normally greater than \$100,000, and did t ation solicit any contributions that were not tax deductible as charitable contributions?	ne		6a		x
b	-	did the organization include with every solicitation an express statement that such contributions.	ons or	· -	04		<u> </u>
		re not tax deductible?			6ь		
7	-	zations that may receive deductible contributions under section 170(c).	•••	• -			
a	-	organization receive a payment in excess of \$75 made partly as a contribution and partly for	aoods				ļ
		vices provided to the payor?	3	-	7a		X
ь		did the organization notify the donor of the value of the goods or services provided?		. Г	7b		
с		organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as				
		t to file Form 8282?			7c		х
d	If "Yes,'	Indicate the number of Forms 8282 filed during the year	7d				
е	Did the	organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?.		7e		X
f		organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti			7f		Х
g		panization received a contribution of qualified intellectual property, did the organization file Form 889			7g		
h		panization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file		198-C?.	<u>7h</u>		
8	-	pring organizations maintaining donor advised funds. Did a donor advised fund maintaine	-				
		ring organization have excess business holdings at any time during the year?		··· þ	8		
9		pring organizations maintaining donor advised funds.					
a		sponsoring organization make any taxable distributions under section 4966? .	•		9a		
ь 10		sponsoring organization make a distribution to a donor, donor advisor, or related person? .	•	H	9b		
a			0a				
b			0b		1		
11		1 501(c)(12) organizations. Enter					
а		, .	1a				
b		ncome from other sources (Do not net amounts due or paid to other sources					
-			1b	1			
12a	-	4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 1041? .	1	l2a		
b			26				
13		501(c)(29) qualified nonprofit health insurance issuers.					
а		rganization licensed to issue qualified health plans in more than one state?		. 1	I3a		
	Note. S	ee the instructions for additional information the organization must report on Schedule O		Γ			
b	Enter th	e amount of reserves the organization is required to maintain by the states in which					
	the orga		<u>3</u> b				
С			3c				
1 4 a		organization receive any payments for indoor tanning services during the tax year? .			I4a		Х
b	If "Yes,"	has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O .	1	4b		

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Form	990 (2017)	NRA Civil Rights Defense Fund		136665		Page 6
Pa	rt Vi	Governance, Management, and Disclosure For each "Yes" response to lines 2 through				
		response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				ons.
		$^\circ$ Check if Schedule O contains a response or note to any line in this Part VI . $~~$.				X
Sec	tion A.	Governing Body and Management				
	,		<u> </u>		Yes	No
1a	Enter t	ne number of voting members of the governing body at the end of the tax year	la	10		
		are material differences in voting rights among members of the governing body, or			1	
		overning body delegated broad authority to an executive committee or similar				
	commi	tee, explain in Schedule O				
b	Enter t	ne number of voting members included in line 1a, above, who are independent .	b	10		
2		officer, director, trustee, or key employee have a family relationship or a business relationship				
	-	er officer, director, trustee, or key employee?		2		X
3		organization delegate control over management duties customarily performed by or under the	e direct			1
		sion of officers, directors, or trustees, or key employees to a management company or other		3		X
4		organization make any significant changes to its governing documents since the prior Form 990 was		4	-	X
5		organization become aware during the year of a significant diversion of the organization's as		5		X
6		organization have members or stockholders?	1010	6		X
7a		organization have members, stockholders, or other persons who had the power to elect or ap	 Mount	–		
74		more members of the governing body?	point	7a		x
b		v governance decisions of the organization reserved to (or subject to approval by) members,		10	-	\uparrow
		ploters, or persons other than the governing body?		76		x
8		organization contemporaneously document the meetings held or written actions undertaken	1	10		
0		r by the following.	Junny			
а	-			 8a	X	
b	-	ommittee with authority to act on behalf of the governing body?	•	8b	Î	
9		any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	chod		\uparrow	
3		rganization's mailing address? If "Yes," provide the names and addresses in Schedule O	Sheu	9		x
Sect		Policies (This Section B requests information about policies not required by the In	tornal Povanue		<u>ا</u>	
000		Choices (This becaush b requests micrimation about poincies not required by the m	iernai Nevenue	COUE	Yes	No
10a	Did the	organization have local chapters, branches, or affiliates?		10a		X
b		' did the organization have written policies and procedures governing the activities of such chi	onters	100		
-		s, and branches to ensure their operations are consistent with the organization's exempt purp		106		
11a		organization provided a complete copy of this Form 990 to all members of its governing body before		11a	x	
b		e in Schedule O the process, if any, used by the organization to review this Form 990		1.14	<u> ^ -</u>	1
12a		organization have a written conflict of interest policy? If "No," go to line 13.		12a	x	
b		ficers, directors, or trustees, and key employees required to disclose annually interests that could giv	e rise to conflicts?	12b	X	
c		organization regularly and consistently monitor and enforce compliance with the policy? If "Ye			<u> </u>	
-		e in Schedule O how this was done		12c	x	
13		organization have a written whistleblower policy?		13	X	
14		organization have a written document retention and destruction policy?		14	X	
15		process for determining compensation of the following persons include a review and approva	lbv	<u> </u>		
		ident persons, comparability data, and contemporaneous substantiation of the deliberation ar	-			
а		anization's CEO, Executive Director, or top management official		15a		×
b		fficers or key employees of the organization		15b		X
		to line 15a or 15b, describe the process in Schedule O (see instructions)	· · · ·			
16a		organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent			
		axable entity during the year?		16a		X
b		did the organization follow a written policy or procedure requiring the organization to evaluate	e its			
-		ation in joint venture arrangements under applicable federal tax law, and take steps to safegu				
		anization's exempt status with respect to such arrangements?		16b		·
Sect		Disclosure		1.00		
17		states with which a copy of this Form 990 is required to be filed See Attached State	ment			
18		6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-		3)s only	·····	
		e for public inspection Indicate how you made these available Check all that apply	(00000000000000)		,,	
			aın in Schedule O))		
19	السب جب ا	e in Schedule O whether (and if so, how) the organization made its governing documents, co			d	
		I statements available to the public during the tax year	et of antoreat pr		-	
20		e name, address, and telephone number of the person who possesses the organization's boo	ks and records	►		
•			703-267-1000			
		Craig B. Spray		••••		

Form 990 (2017)	NRA Civil Rights Defense Fund	52-11366 <u>65</u>	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compens	ated	
	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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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	box,	unle	Pos heck ss pe	erson lirect	e than c is both or/trust	n an cee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Robert Cottrol	1.00									
Trustee	0 00	X								
(2) Robert E. Sanders	1 00]								
Trustee	0.00	X								
(3) Curtis S. Jenkins	1 00									
Trustee	1 00	X								
(4) Charles L Cotton	1.00									
Trustee	1 00	X								
(5) Robert K Corbin	1 00									
Trustee	0 00	X								<u> </u>
(6) William H Satterfield	1.00			Γ						
Trustee	1 00	X								
(7) William H Dailey	1 00				I					
Trustee	0.00	X								
(8) Robert J. Dowlut	1 00									
Trustee	0.00	X							224,047	
(9) James W. Porter, II	1.00					1	ĺ			
Chairman	1.00	X		X						
(10) Carol Frampton (Bambery)	1.00									
Vice Chairman	1.00	X		X						
(11) Graham Hill	1.00									
Trustee	1.00	X								
(12) Wilson H Phillips Jr	1.00									
Treasurer	39.00			X					664,313	45,683
(13) Stefan Tahmassebi	1.00									
Secretary	40.00			X					211,443	61,924
(14)										
						1				

	990 (2017)	NRA Civil Rights Defense Fund		-							52-113		Р	age 8
_ _c P;	art VII Se	ection A. Officers, Directors, Tru			-	(Pos	C) ation					nued)		
		(A) Name and title	(B) Average					e than c is both		(D) Reportable	(E) Reportable	E	(F) stimate	ed
	•		hours per week (list any			<u> </u>	_	or/trust		compensation from	compensation from related	a	mount other	of
			hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org ar	npensa from the ganizat nd relat anizati	e Ion ed
(15)														
(16)														
(17)										·····				
(18)														
(19)														
(20)												1		
(21)														
(22)														
(23)														
(24)														
(25)														
1b	Sub-total							<u> </u>	►	0	1,099,803		107	7,607
C		ontinuation sheets to Part VII, S		•						0	0			0
 2	Total number of	es 1b and 1c) of individuals (including but not lin mpensation from the organization	nited to those lis						ved	0 more than \$100	1,099,803 ,000 of		107	7,607
3		ization list any former officer, dire	<u></u>	kev e	mol	-	e 0	r hiah	nest	compensated			Yes	No
•	•	line 1a? If "Yes," complete Sched			-			-	•	• •		3		X
4	-	dual listed on line 1a, is the sum o												
	the organization individual	on and related organizations grea	ater than \$150,00	00? <i> </i>	Γ"Ye	9S, "	com	nplete	Sc	hedule J for suci	h	4	<u> </u>	
5	Did any perso	n listed on line 1a receive or accr	•			-			-		vidual			Ĵ
Sec		endered to the organization? If "Yon ndent Contractors	es, complete so	neau	lie J	TOF	suc	n per	son	••	<u> </u>	5		x
1	Complete this	table for your five highest competing from the organization. Report co										tax		
	you	(A) Name and business add	ress							(B) Description of ser	vices	(C Comper		
														0
										 .				0
											-			0
2	Total number :	of independent contractors (inclu			the	<u>eo li</u>	istor	d abo		who received				
4		00,000 of compensation from the	-	Cu 10 ►	0	50 I		0 10						

	990 (20 ⁻		Fund				52-11366	65 Page 9
Par	t VIII	Statement of Revenue Check if Schedule O contains		ote to any line in	this Part VIII			
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ន្ទ	1a	Federated campaigns	<u>1a</u>	154,473				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	. <u>1b</u>	0				
ts, G Am	C	Fundraising events	1c	0				
, Gif	d	Related organizations) 1d	88,500				
lons - Sin	e f	All other contributions, gifts, gran	·	0				
ther	•	similar amounts not included abo		490,614				
ontri nd O	g	Noncash contributions included in li		0				
ũ Ē	ĥ	Total. Add lines 1a–1f			733,587			
пe				Business Code				
Program Service Revenue	2a				0			
e Re	Ь				0			
L S C C	C d				0			<u>_</u>
n Se	d				0			
grar	f	All other program service revenue			0		1	
Pz	g	Total. Add lines 2a–2f	- 	🕨	0			1
	3	Investment income (including div	idends, interest,	and				
		other similar amounts)		▶	134,925			134,925
	4	Income from investment of tax-ex	empt bond proc	eeds ►	0			
	5	Royalties	(I) Real	. 🕨	0			
	6a	Gross rents	(1) Near					
	b	Less rental expenses						
	c	Rental income or (loss)	0	0				
	d	Net rental income or (loss)		🕨	0	-		
	7a	Gross amount from sales of	(I) Secunties	(แ) Other				
		assets other than inventory .	181,884	0				
	b	Less: cost or other basis	450.050					
	~	and sales expenses Gain or (loss)	152,950 28,934	0				
	d	Net gain or (loss)	20,004			• _		28,934
	-							
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1 See Part IV, line 18	с).	0				
Ĕ	b	Less direct expenses	•	0				
0	С	Net income or (loss) from fundrai	-	<u> </u>	0			;
	9a	Gross income from gaming activit						
	h	See Part IV, line 19 Less. direct expenses		0				
		Net income or (loss) from gaming	•		0			·
		Gross sales of inventory, less				·····]
		returns and allowances	. a	0				
	b	Less cost of goods sold	. b	0				
	С	Net income or (loss) from sales o	f inventory	►	0			
		Miscellaneous Revenue		Business Code	<u> </u>]
		Miscellaneous			1			1
	b		1		0			
	с d	All other revenue .			0	<u></u>		
	e			►	0	· · · · · · · · · · · · · · · · · · ·		
	12	Total revenue. See instructions		►	897,447	0	0	163,860

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Form **990** (2017)

NRA Civil Rights Defense Fund

following SOP 98-2 (ASC 958-720)

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 (D) (C) (A) (B) Do not include amounts reported on lines 6b, 7b, **Total expenses** Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations 1 739,950 domestic governments See Part IV. line 21 . . 739,950 Grants and other assistance to domestic 2 582,909 582,909 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 0 4 Benefits paid to or for members 0 5 Compensation of current officers, directors, trustees, and key employees 0 0 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 7 0 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . 0 0 9 Other employee benefits 0 10 Payroll taxes 11 Fees for services (non-employees): 0 Management а 10,000 10,000 b Legal 19,700 19,700 С Accounting 0 Lobbying d 0 Professional fundraising services See Part IV, line 17 e Investment management fees 22.818 22,818 f Other. (If line 11g amount exceeds 10% of line 25, column g (A) amount, list line 11g expenses on Schedule O) 8,207 8,207 12 Advertising and promotion 0 7,031 7,031 Office expenses . . 13 10,006 10,000 Information technology 14 . . 15 Rovalties 0 . . 0 16 Occupancy 0 17 Travel Payments of travel or entertainment expenses 18 n for any federal, state, or local public officials 4,156 4,156 19 Conferences, conventions, and meetings 20 0 Interest 0 Payments to affiliates . 21 . 0 0 0 Depreciation, depletion, and amortization 0 22 0 23 Insurance 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) 1.099 27,555 26,456 Printing and publications а Charitable Org report fees 4,922 4,922 b Annuity expense 829 829 С 0 d _____ All other expenses 839 839 е Total functional expenses. Add lines 1 through 24e 1,438,922 1,332,859 104,958 1,105 25 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

Form 990 (2017) NRA Civil Rights Defense Fund 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
	1	Cash—non-interest-bearing		0	1	
	2	Savings and temporary cash investments		1,335,347	2	1,749,770
	3	Pledges and grants receivable, net	. [916,725	3	812,647
	4	Accounts receivable, net	[0	4	0
	5	Loans and other receivables from current and former officers, d	irectors,			
		trustees, key employees, and highest compensated employees	. _			
		Complete Part II of Schedule L		0	5	
ø	6	Loans and other receivables from other disqualified persons (as defined und 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing em sponsoring organizations of section 501(c)(9) voluntary employees' beneficial organizations (see instructions). Complete Part II of Schedule L	ployers and	0	6	
Assets	-	Notes and loans receivable, net	• • +	0	7	0
As			• +	0	8	0
-	8		· · -	71,357	9	04.040
	9	Prepaid expenses and deferred charges	· · -	/1,357		81,210
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a				
			0			
	b			0	10c	2 709 4 45
	11	Investmentspublicly traded securities	F	3,288,766	<u>11</u> 12	3,708,145
	12	Investments—other securities See Part IV, line 11	· · F	0	12	0
	13	Investments—program-related. See Part IV, line 11 .	· · · ·	0	14	0
	14 15	Intangible assets	· ·	1,473,317	14	
	15		-	7,085,512	16	1,624,831
	17	Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses	· · · ·	131,149		<u>7,976,603</u> 43,960
	18		· · F	0	18	43,900
	19	Grants payable	· -	0	19	
	20			0	20	
	21	Iax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Sched		0	21	
S	22	Loans and other payables to current and former officers, directo		0		
tle	22	trustees, key employees, highest compensated employees, and				
Liabilities		disqualified persons. Complete Part II of Schedule L .	' -	0	22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	<u>.</u> –	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	' ⊢	0	24	0
	25	Other liabilities (including federal income tax, payables to relate	d third		<u> </u>	. <u> </u>
		parties, and other liabilities not included on lines 17-24). Complete				
		Part X of Schedule D		194,194	25	1,203,743
	26	Total liabilities. Add lines 17 through 25	-	325,343		1,247,703
ces		Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.				
a	27	Unrestricted net assets		3,692,895	27	3,436,839
Bal	28	Temporarily restricted net assets		1,454,625	28	1,594,636
P	29	Permanently restricted net assets		1,612,649	29	1,697,425
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34.	▶ and			
ste	30	Capital stock or trust principal, or current funds .		0	30	<u> </u>
SS	31	Paid-in or capital surplus, or land, building, or equipment fund	Г	0	31	
ťΑ	32	Retained earnings, endowment, accumulated income, or other f	unds	0	32	
ž	33	Total net assets or fund balances		6,760,169	33	6,728,900
	34	Total liabilities and net assets/fund balances		7,085,512	34	7,976,603

Form 990 (2017)

Form, 9	090 (2017) NRA Civil Rights Defense Fund	52	-1136665	Pag	_{je} 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		897	7,447
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,438	3,922
3	Revenue less expenses Subtract line 2 from line 1	3		-541	1,475
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6 <mark>,76</mark> 0	0 <u>,169</u>
5	Net unrealized gains (losses) on investments	5		510	0,206
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		6,728	3,900
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 X 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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	^
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis X Both consolidated and separate basis				
-	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
С	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	x	J
	If the organization changed either its oversight process or selection process during the tax year, explain in		20	^	
	Schedule O.				
22	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				J
3a	the Single Audit Act and OMB Circular A-133?		3a		
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	• •			<u> </u>
U	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь		
	required addit of addits, explain why in ochedule of and describe any steps taken to undergo such addits				

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Form 990 (2017)

SCHEDULE A (Form 990 or 990-EZ)

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.

20 7 **Open to Public**

OMB No 1545-0047

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	tment of the Treasury al Revenue Service	► Go	to www.irs.gov/Form	n990 for instructions a	nd the late	st informa	ation.	Inspection
	of the organization						Employer identification	number
	Civil Rights Defen							36665
Par				ganizations must co				
				For lines 1 through 12,				1
1				of churches described i			(A)(I). (⁽)	Ŧ
2	—			tach Schedule E (Form				1
3		•		zation described in sec	-			
4		earch organizatione, city, and state		inction with a hospital c	lescribed	in section	170(b)(1)(A)(11). Er	iter the
5		on operated for th b)(1)(A)(iv). (Com		ge or university owned	or operate	ed by a go	vernmental unit dese	cribed in
6	A federal, stat	e, or local govern	nment or governmer	ntal unit described in se	ection 170)(b)(1)(A)	(v).	
7			eceives a substanti (A)(vi). (Complete I	al part of its support fro Part II.)	m a gove	rnmental e	unit or from the gene	ral public
8	A community f	trust described in	section 170(b)(1)(A)(vi). (Complete Part	II)			
9				section 170(b)(1)(A)(ix ture (see instructions)				
10	An organization receipts from support from g	activities related gross investment	to its exempt function income and unrelated	nan 33 1/3% of its supp ons—subject to certain ted business taxable in See section 509(a)(2).	exceptior come (les	ns, and (2) is section	no more than 33 1/3 511 tax) from busine	3% of its
11	An organizatio	on organized and	operated exclusive	ly to test for public safe	ety. See s e	ection 50	9(a)(4).	
12	of one or more	e publicly suppor	ted organizations di	ly for the benefit of, to escribed in section 50 9 ibes the type of suppor	9(a)(1) or :	section 5	09(a)(2). See sectio	n 509(a)(3).
а	the suppor	ted organization(pervised, or controlled l ularly appoint or elect a tions A and B.				
b	control or r	nanagement of th		r controlled in connecting a controlled in connecting a connection vested in the same control of the same				
с	Type III fur	nctionally integr	ated. A supporting	organization operated i				rated with,
d				. You must complete F rting organization opera				anization(s)
-	that is not f	unctionally integi	rated. The organiza	tion generally must sat	isfy a distr	ribution re	quirement and an at	
е				plete Part IV, Sections ritten determination from				<u>م ااا</u>
c	functionally	integrated, or Ty	pe III non-functiona	ally integrated supportin	ng organiz	ation		
f		ber of supported	-					0
g			n about the support		(1.) In the s			
	(I) Name of supported	organization	(li) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)		· · ·						-
(C)								
(D)								
(E)			· · ·				· · · · · · · · · · · · · · · · · · ·	
Tota		<u> </u>					0	0

Pa	rt II Support Schedule for Orga (Complete only if you checked	ed the box on lin	ie 5, 7, or 8 of F	Part I or if the o	rganization fail	led to qualify un	der
	Part III. If the organization fa	ils to qualify und	ler the tests list	ted below, pleas	se complete P	art III.)	
	ction A. Public Support	····	(1) 0044	(-) 0045	(4) 0040	(-) 2017	
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	1,120,601	1,414,748	678,003	1,457,672	733,587	5,404,611
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					0
3	The value of services or facilities furnished by a governmental unit to the organization without charge .						0
4	Total. Add lines 1 through 3	1,120,601	1,414,748	678,003	1,457,672	733,587	5,404,611
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) .						772,307
6	Public support. Subtract line 5 from line 4				1		4,632,304
	ction B. Total Support		(1) 004 (T		(1) 0040	(1) 0047	(0 7-4-1
_	ndar year (or fiscal year beginning in) 📃 🏲	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	1,120,601	1,414,748	678,003	1,457,672	733,587	5,404,611
8	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from						
	similar sources	120,619	145,886	126,632	114,338	134,925	642,400
9	Net income from unrelated business activities, whether or not the business is regularly carned on .	120,013	140,000	120,002		101,020	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	10,146	33	0	14	1	10,194
11	Total support. Add lines 7 through 10	10,140				· · · ·	6,057,205
12	Gross receipts from related activities, etc. (se	e instructions).	 			12	<u></u>
13	First five years. If the Form 990 is for the or			, or fifth tax year as	a section 501(c)	3)	
	organization, check this box and stop here						. 🕨 🗖
Sec	ction C. Computation of Public Su	oport Percenta					
14	Public support percentage for 2017 (line 6, c	olumn (f) dıvıded by	line 11, column (f))		14	76.48%
15	Public support percentage from 2016 Schedu	ule A, Part II, line 14			· [15	76.89%
	33 1/3% support test—2017. If the organization dealine and stop here. The organization qualifies as	a publicly supporte	d organization				.
	33 1/3% support test—2016. If the organization qualified box and stop here. The organization qualified	es as a publicly supp	oorted organization				· · • •
17a	10%-facts-and-circumstances test—2017 is 10% or more, and if the organization meet Part VI how the organization meets the "facts organization	s the "facts-and-circ	umstances" test, c	heck this box and s zation qualifies as a	stop here. Explair	n in	. •
b	10%-facts-and-circumstances test—2016 15 is 10% or more, and if the organization m Explain in Part VI how the organization meet supported organization.	eets the "facts-and-	circumstances" tes cumstances" test T	t, check this box ar	nd stop here.	у	 [_]
12	Private foundation. If the organization did r						
18		, , , , , , , , , , , , , , , , , , ,					. 🕨 🗌

Schedule A (Form 990 or 990-EZ) 2017

NRA Civil Rights Defense Fund

Schedule A (Form	990	or 990	-EZ)	2017
Sciledric M		330	01 330		

52-1136665

Page 2

		Rights Defense F				52-11366	65 \ Page 3
Pa	t III Support Schedule for Qrga	anizations Des	cribed in Sect	tion 509(a)(2)			
	(Complete only if you checked	ed the box on li	ne 10 of Part I	or if the organia	zation failed to	qualify under F	Part II. /
	If the organization fails to qu	alify under the	tests listed belo	ow, please com	plete Part II.)		
Sec	ction A. Public Support	\backslash		-			
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants ")						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						0
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						0
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on	1					
_	its behalf		<u> </u>				0
5	The value of services or facilities		\mathbf{i}				
	furnished by a governmental unit to the		\backslash				
	organization without charge			/			0
6	Total. Add lines 1 through 5	0	<u> </u>	0	0	0	0
7a	Amounts included on lines 1, 2, and 3		\backslash				
	received from disqualified persons.						0
b	Amounts included on lines 2 and 3						
	received from other than disqualified			\backslash			
	persons that exceed the greater of \$5,000			\mathbf{X}			
	or 1% of the amount on line 13 for the year			\backslash			0
с	Add lines 7a and 7b	0	0	\ 0	0	0	0
8	Public support (Subtract line 7c from		/	$\langle \rangle$			
	line 6.)						0
Sec	tion B. Total Support	/	· · · · · · · · · · · · · · · · · · ·	Ň	•	•	
	ndar year (or fiscal year beginning in)	(a) 2013/	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6.	/ 0	0	ů.	0	0	0
	Gross income from interest, dividends,				1		
	payments received on securities loans, rents,						
	royalties, and income from similar sources						0
Ь	Unrelated business taxable income (less	/	···- ···		Ň.		
U		/					
	section 511 taxes) from businesses						0
_	acquired after June 30, 1975	0	0	0	` 0	0	0
	Add lines 10a and 10b			0		0	<u>U</u>
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						0
12	Other income. Do not include gain or					N	
	loss from the sale of capital assets						
	(Explain in Part VI)					<u> </u>	0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	0	0	0	0		0
14	First five years. If the Form 990 is for the or	rganization's first, s	second, third, fourth	n, or fifth tax year a	is a section 501(c)	(3)	
	organization, check this box and stop here	· ·	<u> </u>		• •	• 1	▶ <u></u>
Sec	ction C. Computation of Public Sup	pport Percenta	age			<u> </u>	
15	Public support percentage for 2017 (line 8, c	olumn (f) divided b	y line 13, column (i	f))		15	0 00%
16	Public support percentage from 2016 Sched	ule A, Part III, line 1	15	<u> </u>	<u> </u>	16	0.00%
Sec	ction D. Computation of Investmer					N N	
17	Investment income percentage for 2017 (line			olumn (f))		17	0.00%
18	Investment income percentage from 2016 Se		-			18	0.00%
	33 1/3% support tests—2017. If the organi			4, and line 15 is m	ore than 33 1/3%.	and line 17 is	V
	not more than 33 1/3%, check this box and s						\ ► 🗖
b	33 1/3% support tests-2016. If the organi	•			-		
	line 18 is not more than 33 1/3%, check this						· · \ · · ► 🔲
20	Private foundation. If the organization did r	not check a box on	line 14, 19a, or 19	b, check this box a	ind see instruction:	5	. 🔪 🕨 🗖

52-1136665 Schedule A (Form 990 or 990-EZ) 2017 NRA Civil Rights Defense Fund Page 4 **Supporting Organizations** Part IV (Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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 1 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 2 organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a 3a (b) and (c) below. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the 3b organization made the determination. c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) 3c (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign b 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 Did the organization support any foreign supported organization that does not have an IRS determination С 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) 4c purposes 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 5a was accomplished (such as by amendment to the organizing document) 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 5c c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with 7 regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? 8 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 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 Did one or more disgualified persons (as defined in line 9a) hold a controlling interest in any entity in which b the supporting organization had an interest? If "Yes," provide detail in Part VI. 9Ь c Did a disgualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below 10a Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to ь

determine whether the organization had excess business holdings)

Schedule A (Form 990 or 990-EZ) 2017

10b

	le A (Form 990 or 990-EZ) 2017 NRA Civil Rights Defense Fund	52-1136665	F	age 5
Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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 Pai	rt VI. 11c	_	
Secti	ion 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, o	r		
	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 support	ed		
	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 Pa	rt		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Secti	on 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 director	's		
	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		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the p			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of	f the		
	organization's governing documents in effect on the date of notification, to the extent not previously provide			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		1	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part V			
	the organization maintained a close and continuous working relationship with the supported organization(s			
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	· · · · · ·	لاستجميه
Secti	on 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 yea	ar (see instruction	is).	

- 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 ontity (see instructions).
- 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
- 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.
- 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.*
- **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*

Schedule A (Form 990 or 990-EZ) 2017

2a

2b

3a

3b

Yes No

Sahedule A (Form 990 or 990-EZ) 2017 NRA Civil Rights Defense Fund	_	52-1	136665 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (
1 Check here if the organization satisfied the Integral Part Test as a qualifying			
instructions. All other Type III non-functionally integrated supporting orga	inizations	s must complete Sections	
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	0	0
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	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
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	0	0
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 035	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3	4		0
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		0
7 Check here if the current year is the organization's first as a non-functional instructions).	illy integr	ated Type III supporting o	organization (see

Schedule A (Form 990 or 990-EZ) 2017

Schodu	Is A (Form 990 or 990-EZ) 2017 NRA Civil Rights Defense Fun	-	E	2-1136665 Page 7
Part				2-1136665 Page 7
·		5) Supporting Organ		Current Veen
	on D - Distributions			Current Year
1				
2	Amounts paid to perform activity that directly furthers exen	ipt purposes of supporte	3	
	organizations, in excess of income from activity		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	ations	
	Amounts paid to acquire exempt-use assets			· · · ·
	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI) See instructions.			
	Total annual distributions. Add lines 1 through 6			
8		the organization is respo	nsive	
	(provide details in Part VI) See instructions.			<u>_</u>
9				
10	Line 8 amount divided by line 9 amount			0.00
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
	Underdistributions, if any, for years prior to 2017			
2	(reasonable cause required—explain in Part VI). See			
	instructions			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
d	From 2015			
e	From 2016	-	· · · · · · · · · · · · · · · · · · ·	
	Total of lines 3a through e	0	· · ·	
g	Applied to underdistributions of prior years	· · · · · · · · · · · · · · · · · · ·	0	· · · ·
	Applied to 2017 distributable amount			-
	Carryover from 2012 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f	0		
4	Distributions for 2017 from	0		
-	Section D, line 7. \$			
<u>a</u>	Applied to underdistributions of prior years	+	0	
	Applied to 2017 distributable amount Remainder, Subtract lines 4a and 4b from 4	<u> </u>		
		0		
5	Remaining underdistributions for years prior to 2017, if			
	any Subtract lines 3g and 4a from line 2 For result		_	
	greater than zero, explain in Part VI. See instructions		0	
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			(
7	Excess distributions carryover to 2018. Add lines 3			
	and 4c	0	· · · · · · · · · · · · · · · · · · ·	
8	Breakdown of line 7:			
а	Excess from 2013			
b	Excess from 2014 .	+		
C	Excess from 2015)		
d	Excess from 2016)		
е	Excess from 2017	0		

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Fo	orm 990 or 990-EZ) 2017 NRA Civil Rights Defense Fund	52-1136665 Page 8
,,Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 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, B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 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, lines 2, 5, and 6 Also complete this part for any additional information. (See instructions.)	Section 1c, 2a, 2b,
Part II Sect	ion B Line 10 Securities litigation settlement Year 2013 also includes	
returned un	used legal assistance fees of \$9,720.	
	······	
	······	
	·	

SCHEDULE	D
(Form 990)	

HTA

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

Attach	to	Form	990.	

OMB No_1545-0047
2017
Open to Public
Inspection

	nent of the Treasury Revenue Service		► Attach to Form 990.	nd the latest inf	ormation	Inspection
	of the organization		/Form990 for instructions a	no the latest init	Employer identification r	umber
	Civil Rights Defe				52-11	36665
Pari	Organiza	ations Maintaining Donor	Advised Funds or Oth	er Similar Fu		
		e if the organization answer				
	•		(a) Donor advised f		(b) Funds and	other accounts
1	Total number a	it end of year				
2		of contributions to (during year)				
3	** *	of grants from (during year)				
4		ue at end of year				
5		ation inform all donors and don				
~		organization's property, subject t				Yes No
6		zation inform all grantees, donoi haritable purposes and not for t				
	•	rring impermissible private bene				🗌 Yes 🗌 No
Part		ation Easements.		•	· · · · · · ·	
		e if the organization answer	ed "Yes" on Form 990	Part IV line 7		
1		conservation easements held by				
•		on of land for public use (e.g , r			n of a historically impo	ortant land area
	川	of natural habitat			n of a certified historic	
			L			
2		on of open space 2 a through 2d if the organization	on held a qualified conserva	ation contributio	n in the form of a cons	ervation
-		he last day of the tax year.				the End of the Tax Year
а		f conservation easements			. 2a	
b	Total acreage r	restricted by conservation easer	nents		2b	
С	-	servation easements on a certil		ed in (a).	2c	
d		servation easements included in		, and not on a		
		re listed in the National Register			[2d]	
3		servation easements modified,	transferred, released, extin	guished, or tern	ninated by the organiz	ation during
	the tax year		psopration assembnt is los	atod D		
4 5		es where property subject to co nization have a written policy reg			handling of	
J		enforcement of the conservatio				Yes No
6		eer hours devoted to monitoring, in				during the year
	•	•		-		
7	Amount of exper	nses incurred in monitoring, inspec	ting, handling of violations, ar	id enforcing cons	ervation easements duri	ng the year
	▶ \$					
8		servation easement reported of	n line 2(d) above satisfy the	e requirements o	of section 170(h)(4)(B)	
	and section 17					
9		scribe how the organization rep				
		and include, if applicable, the to n's accounting for conservation		yanization s nina		uescribes
Part		ations Maintaining Collect		Treasures, o	r Other Similar As	sets.
		e if the organization answer				
1a		ion elected, as permitted under			evenue statement and	balance sheet
	works of art, hi	storical treasures, or other simil	ar assets held for public ex	hibition, educate	ion, or research in furt	herance
		e, provide, in Part XIII, the text				
b		ion elected, as permitted under				
		storical treasures, or other simil		hibition, education	ion, or research in furt	herance
	•	e, provide the following amount	-		L A	
		cluded on Form 990, Part VIII, I			··· · ▶ <u>\$</u>	40.000
~	• •	•			· · · ► \$	10,000
2	-	tion received or held works of an				
~	•	ints required to be reported und ded on Form 990, Part VIII, line		-	CIII3. ► ¢	
a b			1		· · · . ► \$	
_		tion Act Notice, see the Instruc		<u>.</u>		hedule D (Form 990) 2017

Sched	ule D (Form 990) 2017 NRA Civil Rights D	efense Fund					52-113	6665		Page 2
Pari	III Organizations Maintaining	Collections of A	rt, Histor	rical Trea	asures, or	Other	Similar Asse	t <mark>s</mark> (conti	nued)	
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and other	records, o	check any	of the follow	ing tha	t are a significan	t use of it	s	
а	X Public exhibition		d 🗌	Loan d	or exchange	progra	ms			
			• —	Other						
b	Scholarly research		<u>و</u>	Other						
c	Preservation for future generati				л. н.					
4	Provide a description of the organizati XIII.	on's collections and	explain h	ow they fu	irther the org	anizati	on's exempt purp	ose in Pa	art	
5	During the year, did the organization s assets to be sold to raise funds rather							1 Ye	es 🛛] No
Part	IV Escrow and Custodial Arra	ngements.								
	Complete if the organization 990, Part X, line 21.	answered "Yes" of	n Form 9	990, Part	IV, line 9, o	er repo	orted an amour	nt on For	m	
1a	Is the organization an agent, trustee, o	custodian or other in	termediar	y for contr	ibutions or of	ther as	sets not	_	_	
	included on Form 990, Part X?					•		Ye	es 🗌	No
b	If "Yes," explain the arrangement in Pa	art XIII and complete	e the follow	wing table:	:			<u> </u>		
								Amount		
С	Beginning balance .		•				1			0
d	Additions during the year		•		•		d			
e	Distributions during the year			•	• •					
Т	Ending balance .		•	••						0
2a	Did the organization include an amoun	nt on Form 990, Parl	t X, line 2'	1, for escro	ow or custod	al acco	ount liability?	Ye	es 🔄	No
b	If "Yes," explain the arrangement in Pa	art XIII Check here i	f the expla	anation ha	as been provi	ded or	Part XIII]
Part	V Endowment Funds.									
	Complete if the organization	answered "Yes" of	n Form 9	90, Part	IV, line 10.					
		(a) Current year	(b) Pric	or year	(c) Two years	back	(d) Three years bac	:k (e) Fo	ur years	s back
1a	Beginning of year balance	1,198,794	1	,162,434	1,23	6,990	1,188,3	31	1,06	65,958
b	Contributions	13,615		10,017	1	1,993	32,2	73	1	2,565
С	Net investment earnings, gains,									
	and losses	177,312		85,293	-2	3,800	76,1	86	16	63,042
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	60,779		58,950	6	2,749	59,8	00	5	53,234
f	Administrative expenses									
g	End of year balance	1,328,942		,198,794		52,434	1,236,9	90	1,18	38,331
2	Provide the estimated percentage of t	-	-	line 1g, co	lumn (a)) hel	d as.				
а	Board designated or quasi-endowmer		%							
b	Permanent endowment	100%								
С	Temporarily restricted endowment	• %								
•	The percentages on lines 2a, 2b, and									
3a	Are there endowment funds not in the	possession of the o	rganizatio	in that are	neid and adi	ministe	red for the	1	Vec	Na
	organization by							20(1)	Yes	No X
	(i) unrelated organizations	• •	•	•	•	• •	•	<u>3a(i)</u> 3a(ii)	x	<u> </u>
F	(ii) related organizations If "Yes" on line 3a(ii), are the related o	reasizations listed a	c. roguirod	 Lon Schor	 Julo P2	•	·	3b	X	<u> </u>
b	Describe in Part XIII the intended use	-				• •	•		~	L
4 Part			5 EIIUOWI		>					
Farl	Complete if the organization		n Form 0	00 Dart	IV line 11a	Soo	Form 000 Par	t X line	10	
	Description of property	(a) Cost or oti (investm			st or other s (other)	•) Accumulated depreciation	(a) B	ook valu	C
1a	Land		0		0					0
b	Buildings	· ·	0		0		0			- 0
c	Leasehold improvements .	· ·	0		0		0			0
d	Equipment .		0		0		0			0
e	Other.		0		0		0			0
-	. Add lines 1a through 1e (Column (d)	must equal Form 99	0, Part X,	column (E			•			0

Schedule D (Form 990) 2017 NRA Civil Rights Defense Fund

_° Part VII	Investments—Other Securities. Complete if the organization answe	red "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 va Cost or end-of-year r	
(1) Financial d	lerivatives	0		
(2) Closely-he	d equity interests	0		
(3) Other				
<u>(A)</u>				
<u>(G)</u> (H)		<u>.</u>		<u> </u>
	b) must equal Form 990, Part X, col (B) line 12) 🕨	0	· · · · · · · · · · · · · · · · · · ·	
Part VIII	Investments—Program Related.	· · · · · ·		
	Complete if the organization answe	red "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 va Cost or end-of-year r	luation
(1)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · ·		
(2)				
(3)				
(4)				
(5)				
(6)		· · · · · · · · · · · · · · · · · · ·		
(8)			·····	
<u>(9)</u>	(b) must equal Form 990, Part X, col. (B) line 13) ▶	0		i
Part IX	Other Assets. Complete if the organization answe (a) De	red "Yes" on Form 990), Part IV, line 11d. See Form	990, Part X, line 15. (b) Book value
(1) ENDOW	MENTS AND GIFT ANNUITIES DUE FRO	OM NRA FOUNDATION		1,614,831
(2) FIREAR	MS/MUSEUM COLLECTIONS			10,000
_(3)	<u> </u>			
_(4)				
(5)			· · ·	
		·		
(8)				
(9) Total (Column	(b) must equal Form 990, Part X, col. (B) line	e 15)	•	1,624,831
Part X	Other Liabilities.		· · · · · · · · · · · · · · · · · · ·	1,02 1,00 1
	Complete if the organization answe line 25.	red "Yes" on Form 990), Part IV, line 11e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal II		0		
	ES PAYABLE	163,010		
(3) DUE TO		1,040,733		
(4)				-
_(5)				
(6)				
(7)				
_ (8)				
-	b) must equal Form 990, Part X, col (B) line 25)	1,203,743		

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

X

Schedu	ule D (Form 990) 2017 NRA Civil Rights Defense Fund	52-1136665	Page 4
, Part		leturn.	
	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	1,380,773
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	510,206
3	Subtract line 2e from line 1	3	870,567
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 26,880		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	26,880
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	897,447
Part	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	r Return.	
1	Total expenses and losses per audited financial statements	1	1,412,042
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		.,
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
ď	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	0
3		3	1,412,042
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		1,412,042
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 26,880		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	26,880
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,438,922
	t XIII Supplemental Information.	<u>_</u>	1,430,922
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part		X line
	int XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional informa		A, IIIe
Part I	III Line 4 The Fund maintains a collection of firearms housed within the National		
Firear	rms Museum where they promote appreciation, understanding, and participation in gun		
collec	cting and the preservation of the heritage of firearms through collection,		
conse	ervation, exhibition and research.		
	V Line 4 To voluntarily assist in the preservation and defense of human, civil, and		
const	itutional rights of individuals to keep and bear arms in a free society.		
Part >	X Line 2 Management evaluated the Fund's tax positions and concluded that the Fund		
had ta	aken no uncertain tax positions that require adjustment to the financial statements		
to cor	mply with the provisions of the guidance. Generally, the Fund is no longer subject to		
	ne tax regulations by the U.S federal, state, or local tax authorities for years		
	a 2014 which is the standard look back pariod		
Delore	e 2014, which is the standard look-back period.		

Schedule D (Form 990) 2017 NRA Civil Rights Defense Fund	52-1136665 Page 5
Part XIII Supplemental Information (continued)	
·	
	·

SCHEDULE I (Form 990)	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.							
Department of the Treasury Attach to Form 990. Operational Revenue Service Go to www.irs.gov/Form990 for the latest information. In In In In In In In In In In In In In In In In In In In In In /ul>								
Internal Revenue Service Name of the organization		- 0010	www.irs.gov/Form9901	or the latest mormat	ion.	Employer Identi	Inspection fication number	
NRA Civil Rights Defense Fund						5	2-1136665	
Part I General Informa	ation on Grants	and Assistance						
 Does the organization matches selection criteria used Describe in Part IV the or 	I to award the grant	s or assistance?.					X Yes 🗌 No	
					ts. Complete if the or cated if additional spa		ed "Yes" on Form	
1 (a) Name and address of organization or government	n (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 noncash assistance	(h) Purpose of grant or assistance	
(1) The Independent Institute 100 Swan Way, Suite 200 Oakland	, C/ 94-3008370	501(c)3	27,693				2nd Amendment Research	
(2) National Rifle Association 11250 Waples Mill Road Fairfax, V	A 22 53-0116130	501(c)4	707,257				Human, Civil, and Constitutional Rights	
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)						· · · · · ·		
 Enter total number of sec Enter total number of oth 				1 table	 	· · · · · · · · · · ▶	0	

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

Schedule I (Form 990) (2017)

HTA

Page 2

Grants and Other Assistance to Domestic Individuals. Complete of the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (f) Description of noncash assistance (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, recipients cash grant noncash assistance FMV, appraisal, other) 2nd Amendment Research 5 41.537 Legal Assistance 30 537.572 2 Youth Essay Contest я 3.800 3 5 6 Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Part IV Part I Line 2 Payments on grants for legal assistance are made on a cost reimbursement basis upon receipt of detailed bills from grant recipients. Periodic updates on case status and/or research are obtained from grant recipients and reviewed by the Board of Trustees three times per year. The Fund's annual report includes a detailed description of each active case during the year Part II Line 2 Grants to the NRA are made to support litigation where that litigation is directly related to the preservation of the human, civil, and/or constitutional rights of individuals to keep and bear arms Cases supported in 2017 include. Bridgeville Rifle v

Pistol Club, Kolbe v Hogan, Worman v Baker, Doe v Wolf, Maryland Shall Issue v Hogan, Rupp v Becerra, Duncan v Becerra, Flanagan v

Becerra

SCHEDULE J		Com	pensation Information	L		1545-0	0047
		Directors, Trustees, Key Employees, and Hi	ghest	ରା	ิก∕∎ '	7	
		Complete if the executive	Compensated Employees zation answered "Yes" on Form 990, Part IV,	line 22			
Depar	tment of the Treasury	Complete if the organiz	Attach to Form 990.	line 23.	Open		
Interna	al Revenue Service	► Go to www.irs.gov/Fo	orm990 for instructions and the latest inform			ectio	n
	of the organization			Employer identification			
Par	Civil Rights Defense	se Fund s Regarding Compensation		52-11	36665		
rai	Question	s Regarding compensation				Yes	No
1a			ovided any of the following to or for a perso provide any relevant information regarding				
	First-class or	charter travel	Housing allowance or residence fo	r personal use			
	Travel for con	npanions	Payments for business use of pers	onal residence			
	Tax indemnifie	cation and gross-up payments	Health or social club dues or initiat	ion fees			
	=	spending account	Personal services (such as, maid,	chauffeur, chef)			
b			organization follow a written policy regarding			. <u> </u>	
	or reimbursemen explain	t or provision of all of the expenses	s described above? If "No," complete Part II	1 10	1b		
2	Did the organizat	ion require substantiation prior to r	eimbursing or allowing expenses incurred b	y all			
	directors, trustee		Executive Director, regarding the items chec				
	1a?				2		
3	Indicate which if	any of the following the filing orga	nızation used to establish the compensatior	of the			
Ŭ			at apply. Do not check any boxes for metho				
			e CEO/Executive Director, but explain in Pa				
	Compensation	n committee	Written employment contract				
	Independent of	compensation consultant	Compensation survey or study				
	Form 990 of c	other organizations	Approval by the board or compension	ation committee			
4	During the year of	did any person listed on Form 990	Part VII, Section A, line 1a, with respect to	the filing			
-		related organization					
а	Receive a severa	ance payment or change-of-control		•	4 a		X
b		receive payment from, a suppleme			4b		X
С	•	receive payment from, an equity-ba	ased compensation arrangement?	n Part III	4c		_X
	I les to any of						
5			brganizations must complete lines 5–9. Ine 1a, did the organization pay or accrue	any			
		ntingent on the revenues of			<u>-</u>		<u> </u>
a b	The organization Any related organ			•	5a 5b		X X
D		a or 5b, describe in Part III.			50		
6	compensation co	ntingent on the net earnings of	line 1a, did the organization pay or accrue	any			
a	The organization				6a		<u> </u>
Ь		a or 6b, describe in Part III			_6b		<u> </u>
7		d on Form 990, Part VII, Section A, scribed on lines 5 and 6? If "Yes," o	line 1a, did the organization provide any no describe in Part III	onfixed	7		x
8	Were any amoun	ts reported on Form 990, Part VII,	paid or accrued pursuant to a contract that				
	•	al contract exception described in	Regulations section 53 4958-4(a)(3)? If "Ye	s," describe			
	in Part III		· · ·	• •	8		Х
•	16 11/0 c 11	did the encounties of a faller of		ad in			
9			e rebuttable presumption procedure describ		9		

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

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

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

Note: The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title			f W-2 and/or 1099-MIS					
		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
Robert J Dowlut	(i)						0	
1 Trustee	(ii)	224,047	0	0	0	0	224,047	
Wilson H Phillips Jr	(i)						0	
2 Treasurer	(ii)	525,942	100,000	38,371	19,680	26,003	709,996	
Stefan Tahmassebi	(i)						0	
3 Secretary	(ii)	207,201	0	4,242	16,132	45,792	273,367	
A	(i) (ii)							
	(i)							· · · · · · · · · · · · · · · · · · ·
5	(ii)							
	(i)					· · · · · · · · · · · · · · · · · · ·		
6	(ii)							
	(i)							
7	(ii)							
	(i)	1						
8	(ii)							
	(i)							
9	(ii)							
**************************************	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2017

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Schedule J (Form 990) 2017 NRA Civil Rights Defense Fund	_52-1136665	Page 3
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for F	Part II. Also complete	this paft
for any additional information.		
Part I Line 3 This organization relied on the processes of a related organization to establish compensation of top management		
officials, and such processes utilized a compensation committee, independent compensation consultants, compensation surveys and		
studies, comparability data, and ultimate approval by the board or compensation committee. All decisions are properly documented		
Part II Column B(III) Other reportable compensation within taxable wages for Mr. Phillips included \$18,000 457(b) plan, \$16,002		
group life insurance, and \$4,369 taxable personal expenses. Other reportable compensation within taxable wages for Mr. Tahmassebi		
included \$4,242 group life insurance.		
Part II Column C Employer deposits toward benefits that will not be paid until a future date are shown in Column C. The amount for		
Mr Phillips included \$15,900 401(k) and \$3,780 pension plan. The amount for Mr. Tahmassebi included \$13,080 401(k) and \$3,052		
pension plan		
Part II Column D Nontaxable benefits are provided to employees consistent with association industry standards and best practices.		
Standard nontaxable benefits include employee benefits such as the employer paid portions of medical and dental plans and		
long-term and short-term disability plans		

Schedule J (Form 990) 2017

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SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the omanization

Transactions With Interested Persons

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

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

OMB No 1545-0047
2017
Open To Public
Inspection

	organizai		
NRA Civil	Rights	Defense	Fund

52-1136665

Employer identification number

\$

Part I	Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).
	Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

	(a) Name of discussified serves	(b) Relationship between disqualified person and	(c) Description of transaction		rected?
1	(a) Name of disqualified person	organization			No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2	Enter the amount of tax incurred b	y the organization managers or disqualified	persons during the year		

under section 4958.

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

. .

Part II Loans to and/or From Interested Persons.

. .

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

. .

.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loa from organu		(e) Onginal principal amount	(f) Balance due	(g) In c	lefault?	(h) Ap by bo comm	ard or	(i) Wi agreei	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total					\$	0						

Part III

Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) Alice Marie Beard	Spouse of Trustee Robert Dov	5,000		2nd Amend Seminar
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. HTA

Schedule L (Form 990 or 990-EZ) 2017

Schedule R (Form 990) 2017 NR/	A Civil Rigi	hts Defense
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(2) The NRA Foundation, Inc.

(4)

(5)

(6)

(3) National Rifle Association of America

Part	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	,		•
Note	: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		្នា	
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b	X	
с	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s).	1d		X
e	Loans or loan guarantees by related organization(s).	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s).	1 i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		X
k	Lease of facilities, equipment, or other assets from related organization(s)	 1k		X
I	Performance of services or membership or fundraising solicitations for related organization(s)	11		X
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
0	Sharing of paid employees with related organization(s).	10	X	
р	Reimbursement paid to related organization(s) for expenses	1p	x	
q	Reimbursement paid by related organization(s) for expenses .	<u>1q</u>		X
r	Other transfer of cash or property to related organization(s)	<u>1r</u>		X
S	Other transfer of cash or property from related organization(s) .	1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction	n thresh	nolds	
<u> </u>	(a) (b) (c) Name of related organization Transaction type (a-s) Amount involved	Method o amou	(d) of determ nt involve	
(1) Na	tional Rifle Association of America	Cash		

88,500

69,012

Cash

С

р

<u> </u>	(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	Meth an
				Cash
(1) National Rifle Association of America		b	707,257	
	· ·			Cash

990) 2017	NRA Civil Rights Defense Fund	
,		

52-113666

NO.5	-	-
65	Page	

52-11	36665	Page 2

. (a) Name of interested person			Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.				
		(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Shanng of organization's revenues?			
					Yes	No		
(1) (2)						┣──		
(3)		····				<u> </u>		
_(4)								
						<u> </u>		
<u>(6)</u>					_			
(7) (8)						<u> </u>		
(9)								
(10)								
Part V	Supplemental Information Provide additional information	for responses to questions on	Schedule L (see ins	tructions).				
						••••		
						••••••		

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SCHEDULE O

(Form 990 or 990-EZ)

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. ►

	OMB No 1545-0047
ſ	2017
	Open to Public
	Inspection

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.	Inspection							
Name of the organization		Employer identification number							
NRA Civil Rights Defe	nse Fund	52-1136665							
Form 990, Part VI, Se	ction B, Line 11b. The NRA Civil Rights Defense Fund's 990 is reviewed by								
its Board of Trustees and by the external auditing firm before it is filed with the IRS									
Form 990, Part VI, Section B, Line 12c The NRA Civil Rights Defense Fund takes conflicts of									
interest very seriously and utilizes a statement of corporate ethics. To monitor and enforce									
compliance with corpo	rate policies, annual filings must be provided to the NRA Office of the								
Secretary and Genera	I Counsel and reviewed regularly and consistently								
Form 990, Part VI, Se	ction B, Line 15: The NRA Civil Rights Defense Fund relied on a related								
organization's process	es to establish compensation of top management officials. Such processes								
utilized a compensation	n committee, independent compensation consultants, compensation survey	/\$							
and studies, compara	oility data, and ultimate approval by the Board or Compensation Committee								
All decisions are prop	erly documented.								
Form 990, Part VI, Se	ction C, Line 19. Governing documents, audited financial statements, and								
annual reports are ma	de available upon request for the same period of disclosure as set forth								
In section 6104(d) NF	A Civil Rights Defense Fund does not make internal operating policies								
available to the gener	al public								

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization	Employer identification number
NRA Civil Rights Defense Fund	52-1136665
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SCHEDULE R (Form 990)	 Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. 	омв № 1545-0047 20 17
Department of the Treasury Internal Revenue Service	 Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. 	Open to Public Inspection
Name of the organization		Employer identification number
NRA Civil Rights Defense	Fund	52-1136665

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

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

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

(a) Name, address, and EIN of related organization	organization (b) (c) Primary activity Legal domicile (station or foreign country		(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) National Rifle Association of America 53-0116130	Membership						
11250 Waples Mill Road Fairfax, VA 22030		NY	501(c)(4)		N/A		X
(2) The NRA Foundation, Inc. 52-1710886	Charitable						
11250 Waples Mill Road Fairfax, VA 22030		DC	501(c)(3)	Line 7	NRA		X
(3) NRA Freedom Action Foundation 26-1277941	Charitable						
11250 Waples Mill Road Fairfax, VA 22030		VA	501(c)(3)	Line 7	NRA		X
(4) NRA Special Contribution Fund 23-7367534	Charitable						r
P.O Box 700 Raton, NM 87740		NM	501(c)(3)	Line 7	NRA		x
(5) NRA Political Victory Fund 52-1083020	PAC/SSF						
11250 Waples Mill Road Fairfax, VA 22030		VA	527		NRA		X
(6)							
		1					

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

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NRA Civil Rights Defense Fund

52-1136665

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Part III

Part III	because it had or	ne or more related	l organizations	treate	d as a pa	artnersh	ip during	the t	ax year.								•
	(a) e, address, and EIN of elated organization	(b) Primary activity			(d) controlling entity	Pred income unr exclu- tax	(e) ominant e (related, elated, ded from under s 512-514)		(f) re of total ncome	(g) Share of er year ass		(h) oporbona xabons?		< 20 K-1	(j) Genera manag partne	ing o	(k) ercentage wnership
(4)											Ye	s No	•		Yes	No	
<u>(1)</u>		-															
(2)																	
(3)												1					
(4)																	
(5)				+								+					
(6)												+		+			
(7)												+				+	
Part IV	Identification of IV, line 34 becaus												ed "Yes" on	Form	n 990,	Part	
Na	(a) me, address, and EIN of relat	ed organization	(b) Primary activit	Ŋ	(c Legal de (state or fore	omicile	(d) Direct cont entity		Туре о	e) of entity corp, or trust)	(f) Share of t income		(g) Share of end-of-year assets	Perc	(h) entage iership	C0	(i) 512(b)(13) ntrolled ntity?
(1)																Yes	
																<u> </u>	
(3)																	
(4)							†									 	
(5)																1	
(6)																	
		<u>.</u>							<u> </u>								

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34

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

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

or gross revenue) that was not a related (a) Name, address, and EIN of entity	(b) Pnmary activity	(c) Legal domicile (state or foreign country)	(d) (e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income	(9) Share of end-of-year assets	Dispropalloca	h) ortionate itions?	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
(4)				Yes	No			Yes	No		Yes	No	<u> </u>
_(1)													
(2)													
(3)		· · · · ·											
(4)								<u>†</u>					<u> </u>
(5)													<u>+</u>
(6)			<u> </u>					<u>+</u>					<u> </u>
_(7)										······			<u> </u>
(8)													
(9)								1					<u> </u>
(10)				<u> </u>									<u> </u>
(11)													<u> </u>
(12)				<u></u>									<u> </u>
(13)													<u> </u>
(14)		<u>+</u>		<u> </u>									
(15)													
(16)													<u> </u>

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Part VII Provid	emental Information. e additional information for responses to questions on Schedule R. See Instructions.
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