** PUBLIC DISCLOSURE COPY **
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

OMB No. 1545-0047

Department of the Treasury internal Revenue Service

) > Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

A	For th	e 2018 calendar year, or tax year beginning and en	ding		
В	Check II	C Name of organization		D Employer identi	fication number
Г	Addr	NRA CIVIL RIGHTS DEFENSE FUND			
	Nam			52-3	L136665
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	om/suite	E Telephone numb	er
	Final	11250 WAPLES MILL ROAD		703-	-267-1000
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,219,719.
	Amer			H(a) Is this a group	
	Appli tion pend		ĺ	for subordinate	s? Yes X No
_		SAME AS C ABOVE	_	H(b) Are all subordinates	
		empt status; X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1) or	527		a list. (see instructions)
_		te: NWW.NRADEFENSEFUND.ORG	,	H(c) Group exempti	
		forganization; Corporation X Trust Association Other	L Year o	of formation: 1978	M State of leval domicite: VA
Pi	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: SEE SC	:HRDO1	PR O	
Activities & Governance					
F	2	Check this box if the organization discontinued its operations or disposed		1	1
30	3	Number of voting members of the governing body (Part VI, line 1a)			10
9	4	Number of independent voting members of the governing body (Part VI, line 1b)			
ties	5				-
P.	7.0	Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12		72	
¥	h	Net unrelated business taxable income from Form 990-T, line 38			
_	-	The director business subspice inserting north of the open plants are minimum.		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		733,587.	
92	9	Program service revenue (Part VIII, line 2g)		0.	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		163,859.	
æ	11	Other revenue (Part Vill, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	
	12	Total revenue - add lines 8 through 11 must equal Part VIII, column (A), line 12		897,446.	2,148,399.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,322,859.	717,932.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	
60	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
e e	b	Total fundraising expenses (Part IX, column (D), line 25)	_		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		116,063.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,438,922.	
	19	Revenue less expenses. Subtract line 18 from line 12		-541,476.	
SOT			Beg	Inning of Current Year	End of Year
Net Assets	20	Total assets (Part X, line 16)		6,935,870.	
et A	21	Total liabilities (Part X, line 26)		206,970. 6,728,900.	
	22 art	Net assets or tund balances. Subtract line 21 from line 20		0,720,300	7,470,231.
_		ulties of perjury, I declare that I have examined this return, including accompanying schedules an	nd etatemer	nts and to the hest of m	V knowledge and helief it is
	-	ands or perjury, I declaration of preparer (other than officer) is based on all information of which			y knowledge and belief, it is
uuc	, 00110	A and complete. Declaration of projects to a see that of the projects of all mornings of a morning	propuror		14/19
Sig	n	Signature of officer		Date	
Her		CRAIG B. SPRAY, PREASURER			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	D	ate Check	PTIN
Paid	4	ZACK FORTSCH, CPA 3 net Fortsch		11/14/19 If self-em k	P00052725
Pre	parer	Firm's name RSM US LLP		Firm's EIN	42-0714325
Use	Only	Firm's address ONE SOUTH WACKER DR STE 800			
		CHICAGO, IL 60606-3392		Phone no.31	.2-634-3400
Ma	the I	RS discuss this return with the preparer shown above? (see Instructions)			X Yes No

NRA CIVIL RIGHTS DEFENSE FUND

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Form 990 (2018)

Form 990 (2018)

Form 990 2018 NRA CIVIL RIGHTS DEFENSE FUND

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		35	
_	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
	If "Yes," complete Schedule D, Part IV	9		A
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40	х	
44	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	10	Α	
11	as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
d	Part VI	11a		X
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1 (62		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	112		
·	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	110		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 reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
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
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			v
48	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	45		х
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		A
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10_		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? It "Yes " complete Schedule I. Parts I and II	21	X	
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22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
_	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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 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	200		
140	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
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, 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	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
•	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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		Х
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	1	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-37 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	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	X	
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		X
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	
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
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gamblina) winnings to prize winners?	1c	X	
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	. Internation		W	Ma
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Yes	No
	filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
34	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	00	\vdash	
701	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
h	If "Yes," enter the name of the foreign country:	-742		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	5 4 1 4 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1			
-	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Qu		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OL)		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations, Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	_		
а	is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	-		77
		14a		X
	, , , , , , , , , , , , , , , , , , , ,	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	,		w
	excess parachute payment(s) during the year?	15	-	X
I.C	If "Yes," see instructions and file Form 4720, Schedule N.	40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes." complete Form 4720, Schedule O,			

Form 990 2018 NRA CIVIL RIGHTS DEFENSE FUND 52-1136665 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

_		0	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1	U		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	0		
b	Enter the number of voting members included in line 1a, above, who are independent	9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?		-	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		_	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		-	X
6	Did the organization have members or stockholders?	6	-	X
7a				
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
2	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes" provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C, Disclosure			
	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, CO, CT, FL, GA, HI	,IL,	KS,	ΚY
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only) a	availab	le
17 18	Decitor of the reducing all order to make its remotive of terms in the remotive of the contract of the remotive of the remotiv			
17	for public inspection. Indicate how you made these available. Check all that apply.			
17				
17	for public inspection. Indicate how you made these available. Check all that apply.	d financ	ial	
17 18	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)	d financ	ial	
17 18	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d financ	ial	

Form 990 (2018) Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

	Check if Schedule O contains a response or note to any line in this Part VII		1. (
_			_

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A) Name and Title	(B) Average hours per week	kod	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employing	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JAMES W. PORTER II CHAIRMAN	1.00	7,		7.5				0		
	1.00	X	-	X	-			0.	0.	0.
(2) CAROL FRAMPTON	1.00	x		x				0.		
VICE CHAIRMAN (3) CHARLES L. COTTON	1.00	A	-	A	\vdash	-		0.	0.	0.
(3) CHARLES L. COTTON TRUSTEE	1.00	X						0.	0.	0
(4) ROBERT COTTROL	1.00	A.	-			-	Н	0.	U.	0.
TRUSTEE	1.00	X						0.	0.	0.
(5) ROBERT K. CORBIN	1.00							0.	0.	0.
TRUSTEE	2.00	x						0.	0.	0.
(6) ROBERT J. DOWLUT	1.00	-	-			-	-		0.	0.
TRUSTEE		x						0.	154,070.	0.
(7) GRAHAM HILL	1.00	-								
TRUSTEE		x						0.	0.	0.
(8) CURTIS S. JENKINS	1.00									
TRUSTEE	1.00	X						0.	0.	0.
(9) ROBERT E. SANDERS	1.00									
TRUSTEE	1.00	X						0.	0.	0.
(10) WILLIAM H. SATTERFIELD	1.00									
TRUSTEE	1.00	X						0.	0.	0.
(11) CRAIG B. SPRAY	1.00									
TREASURER (BEGIN 09/18)	49.00			X				0.	596,958.	51,257.
(12) STEFAN TAHMASSEBI	1.00									
SECRETARY	40.00	<u></u>		X				0.	215,751.	67,587.
(13) WILSON H. PHILLIPS JR.	1.00									
TREASURER ((END 09/18))	39.00			X		-		0.	900,537.	48,232.
			-							

52-1136665

	(A) Name and title	(B) Average hours per week	offi	, unle	Pos heck ss pe	more reon	than of the both or/trus	ı en	(D) Reportable compensation from	(E) Reportable compensation from relate	on d	ar	(F) stimat nount other	t of r
		(list any hours for related organizations below line)	individual Irustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated emplayee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MI		org an	pens rom th raniza d rela anizat	he Ition Ited
C	Sub-total Total from continuation sheets to Part	VII. Section A							0.	1,867,3	0.			0.
2 2	Total (add lines 1b and 1c) Total number of individuals (including bu compensation from the organization	t not limited to th							0 . ceived more than \$100,	1,867,3:		16	7,0	76. 0
3	Did the organization list any former offic	er, director, or tru	ıstee	, ke	y en	olqr	y e e,	or h	ighest compensated er	nployee on	5		Yes	No
4	line 1a? If "Yes," complete Schedule J for any individual listed on line 1a, is the	sum of reportable	е со	mpe	nsa	tion	and	othe	er compensation from t	he organization		3		X
5	and related organizations greater than \$7 Did any person listed on line 1a receive or rendered to the organization? # "Yes"	or accrue compen	satio	on fr	om a	any	unre	late	d organization or individ	dual for services		5	X	x
Sec 1	tion B. Independent Contractors Complete this table for your five highest											ion fro	m	
_	the organization. Report compensation for								the organization's tax y					
	(A) Name and busine	ss address	NC	NE	3			1	(B) Description of s	ervices	C	ompei		n
					_		_							
2	Total number of independent contractors \$100 000 of compensation from the orga		t iin	nited	l to t	thos		ed a	bove) who received mo	ore than				2042

		Check if Schedule O cont	ains a res	onse	or note to any line	in this Part VIII	050		
						Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
92 sr	1 a	Federated campaigns	18	a .	141,805.				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		,					
Q 3	c	Fundraising events				BY 30 VV			1 12 2
E A	d	Related organizations		1	96,000.				
9	е	Government grants (contribut		9					
Sign	f	All other contributions, gifts, gran							
te de		similar amounts not included abor		:	1,649,353.				
Εā	g	Noncesh contributions included in lines							
200	h	Total. Add lines 1a-1f				1,887,158.	11		
					Business Code				
0	2 a								
- Ş	b								
Program Service	С								
E	d								
PE	e								
P	f	All other program service reve	nue						
	Я								
	3	Investment income (including							
		other similar amounts)				172,481,			172,481.
	4	Income from investment of tax							
	5	Royalties							
		•	(i) Rea		(ii) Personal				
	6 a	Gross rents							
	b	Less: rental expenses							15 3 10
		Rental income or (loss)				304			
	d	Net rental income or (loss)							
		Gross amount from sales of	(ii Securit		(ii) Other				
		assets other than inventory	1,160,0	080.					
	b	Less: cost or other basis							-70 63
		and sales expenses	1,071,						
ŀ	C	Gain or (loss)	88,	760.					
	d	Net gain or (loss)				88,760.			88,760.
evenue		Gross income from fundraising including \$							
946		contributions reported on line	1c). See						
E.		Part IV, line 18		a					
Other R	b	Less: direct expenses		. b					
0	c	Net income or (loss) from fund	Iraising ever	nts					
	9 a	Gross income from gaming ac	tivities. See						
		Part IV, line 19		. a					
	b	Less: direct expenses							
	c	Net income or (loss) from gam	ing activitie	s	▶				
	10 a	Gross sales of inventory, less	returns						
- 1		and allowances		. a					
	b	Less: cost of goods sold		b					
L	Ç	Net income or loss from sales	s of invento	V					
		Miscellaneous Revenue	9		Business Code				
	11 a			_					
	b								
	c								
	d	All other revenue							
	e	Total, Add lines 11a-11d							
	12	Total revenue. See instructions				2,148,399.	0.	0	261,241.

Form 990 2018 NRA CIVIL RIG

	Check if Schedule O contains a response			(A)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expanses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	440,504.	440,504.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	277,428.	277,428.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				Et il III I
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				_
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	10,000.	10,000.		
C		12,723.		12,723.	
d	4 - 4 - 4				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	26,640.		26,640.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O.)	3,635.		3,635.	
12	Advertising and promotion				
13	Office expenses	6,162.		4,333.	1,829.
14	Information technology	10,005.		10,000.	5.
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,106.		6,106.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
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) arnount, list line 24e expenses on Schedule C.)				
9	PRINTING AND PUBLICATIO	18,003.		18,003.	
b	CHARITABLE ORG REPORT F	5,688.		5,688.	
C	ANNUITY EXPENSE	2,003.		2,003.	
d		_,,,,,,		= 70001	
	All other expenses	2,163.		912.	1,251.
e 25	Total functional expenses. Add lines 1 through 24e	821,060.	727,932.	90,043.	3,085.
26	Joint costs. Complete this line only if the organization	222,0001	, , , , , , ,	20,0201	2,0031
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 |2018 | Part X | Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a resuonse or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		1	
2	Savings and temporary cash investments	1,749,770.	2	711,847
3	Pledges and grants receivable, net	812,647.	3	717,884
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
40	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
8 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	81,210.	9	97,757
10a				
1.5-	basis. Complete Part VI of Schedule D 10a			
h	Less: accumulated depreciation 10b		10c	
11	Investments - publicly traded securities	3,708,145.	11	3,580,602
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related, See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets, See Part IV, line 11	584,098.	15	2,568,868
16	Total assets. Add lines 1 through 15 must equal line 34	6,935,870.	16	7,676,958
17	Accounts payable and accrued expenses	43,960.	17	55,300
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
Liabilities N	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third		2.4	
120	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	163,010.	25	151,367
26	Total liabilities. Add lines 17 through 25	206,970.	26	206,667
-	Organizations that follow SFAS 117 (ASC 958), check here 🕨 🐰 and			
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	3,436,839	27	3,213,462
28	Temporarily restricted net assets	1,594,636.	28	1,490,022
29	Permanently restricted net assets	1,697,425.	29	2,766,807
	Organizations that do not follow SFAS 117 (ASC 958), check here			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other tunds		32	
33	Total net assets or fund balances	6,728,900.	33	7,470,291
34	Total liabilities and net assets/fund balances	6,935,870.	34	7,676,958

Form	n 990 (2018) NRA CIVIL RIGHTS DEFENSE FUND	52-1.	1.36665	Pa	ge 12
Pa	rt 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	2,14	3,3	99.
2	Total expenses (must equal Part IX, column (A), line 25)	2	82:	L,0	60.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,32	7,3	39.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,72	3,9	00.
5	Net unrealized gains (losses) on investments	5	-58	5,9	48.
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			O.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	7,470),2	91.
Pa	rt XIII 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	0.	}		
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 Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	-			
	Act and OMB Circular A-133?		3a		X
Ь	If "Yas," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits explain why in Schedule O and describe any steps taken to undergo such audits		3b		

3b Form 990 (2018)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

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.
So to www.irs.gov/Form990 for instructions and the latest Information.

2018 Open to Public

OMB No. 1545-0047

Inspection

Name of the organization **Employer identification number** NRA CIVIL RIGHTS DEFENSE FUND 52-1136665 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E, Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization s. gwis e organiza ion i eg in our gvern i don (iii) Type of organization (I) Name of supported dn EIN (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see Instructions) support (see Instructions) Yes No above see instructions

Part II

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

Section A. Public Support Calendar year (or fiscal year beginning in) 🕨 la 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 [f] Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1414748. 678,003. 1457672. 733,587. 1887158. 6171168. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 1414748. 678,003. 1457672. 733,587. 4 Total, Add lines 1 through 3 1887158. 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) 1578458. 4592710. 6 Public Support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4 1414748. 678.003. 1457672. 733.587. 1887158. 6171168. 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties, 126,632. 114,338. 134,925. 172,481. 145.886. and income from similar sources ... 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 33. 14. 1. 48. assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 6865478. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) or anization, check this box and stop here Section C. Computation of Public Support Percentage 66.90 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f) 14 % 15 Public support percentage from 2017 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A Form 990 or 990-52 2018 NRA CIVIL RIGHTS DEFENSE FUND Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	IDW, DIGESC COINE	Note Fart II.				
Cald	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities turnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7:	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŧ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6 Gross Income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
Ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 8, 10c, 11, and 12.) First five years. If the Form 990 is for t	he organization's	first second this	d fourth or fifth to	L Vear as a section	501(c)/3\ organiz	ation
.7	check this box and stop here						7
Sec	ction C. Computation of Public						
	Public support percentage for 2018 (lin			olumn (f))		15	%
16	Public support percentage from 2017 S	Schedule A, Part I	III line 15		*****************	16	%
	ction D. Computation of Invest						
17	Investment income percentage for 201	8 (line 10c, colum	nn (f), divided by li	ne 13, column (f))	***************************************	17	%
18	Investment income percentage from 2	17 Schedule A,	Part III, line 17		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	18	%
19 <i>a</i>	33 1/3% support tests - 2018. If the o	rganization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box and	•	-			***************************************	
b	33 1/3% support tests - 2017. If the c						
20	line 18 is not more than 33 1/3%, check Private foundation. If the organization		-			-	

Part IV

Supporting Organizations

(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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 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.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Dld the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part 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.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified 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.
- 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.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	- Se		
	3b		
	3c		
	4a		
	4b		
	33.5		
	4c		
	-10		
	<u>5</u> a		
	5b		
	5c_		
	6		
	7		
	8		
	9a		
	9b		
	9c		
-	10a		
	10L		
	10b	0.55	

	odporting organization communed		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		162	140
	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		
	A 35% controlled entity of a person described in a or b above? # 'Yes" to a b or c provide detail in Part VI.	110		
	ction B. Type I Supporting Organizations	110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			14
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
_	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sec	the supported organization(s) ction D. All Type III Supporting Organizations	1		
	Not bridge in depretaing diguillactions		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see it	nstructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
2	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
_	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2b		
3	activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below.	20		-
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
ь		94		
-	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this mode.	3b		

	edule A Form 990 or 990-EZ 2018 NRA CIVIL RIGHTS DEFENS			52-1136665 Page 6
	Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must be			in Part VI.) See instructions, A
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income see instructions	6		
7	Other expenses (see instructions)	7		
В	Adjusted Net Income subtract lines 5, 6, and 7 from line 4	8		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
Ċ	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year from Section B, line 8, Column A	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount Subtract line 5 from line 4 unless subject to			

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

Schedule A (Form 990 or 990-EZ) 2018

emergency temporary reduction (see instructions)

instructions).

Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported or anizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported or anizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts prior IRS approval required			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	na organization is responsive		
	provide details in Part VI). See instructions.	ie organizacion is responsive		
-	Distributable amount for 2018 from Section C. line 6			
9				
10	Line 8 amount divided by line 9 amount	<i>(1)</i>	<i>an</i>	Ares
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-	CIVILITY FILE		
	able cause required- explain in Part VII. See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
ь	From 2014			THE RESERVE
Ċ	From 2015			A THE STATE OF
d	From 2016			
e	From 2017			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
-i				
<u> </u>	Remainder. Subtract lines 3g. 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D.			
7	line 7:			
_	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
_	than zero, excitain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
e	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Schedu	le A (Form 99	90 or 99 <u>0-</u>	2018	NRA (CIVIL	RIGHT	S DEFI	INSE	FUND		52	-113	36665	Page 8
Part	Part IV, line 1; F Section	Section A Part IV, Se	t, lines 1, 2 ction D, lir 5, 6, and 8	2, 3b, 3c, 1es 2 and	4b, 4c, 5 I 3; Part l'	ia, 6, 9a, 9b, V, Section E	9c, 11a, 1′ lines 1c, 2 ,	lb, and 1 a, 2b, 3a	l 1c; Part IV, ı, and 3b; Pa	Part II, line 17a Section B, line Irt V, line 1; Pa Irt for any addi	s 1 and 2 rt V, Sect	; Part l' ion B. I	V, Sectior ine 1e: Pa	C, rt V,
SCHE				LINE	10.	EXPLAI	NATION	FOR	OTHER	INCOME:				
	R INCO													
			22								_			
	AMOUN'		33.											
2016	AMOUN	r: \$	14.											
2017	AMOUN	r: \$	1.											
-														
											-			
													-	
													_	
									 -					
								<u></u> .						

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047 Open to Public

Name of the organization

NRA CIVIL RIGHTS DEFENSE FUND

Employer identification number 52-1136665

organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
ıl number at end of year		

regate value of contributions to (during year)		
regate value of grants from (during year)		
regate value at end of year		
	writing that the assets held in donor advise	ed tunde
-	=	
		·
		Annual Control
		attivime /.
-1		origally important land area
	Preservation of a cert	med historic structure
• •		-4
	led conservation contribution in the form (
		Held at the End of the Tax Yea

•		131111
N	-	organization during the tax
ber of states where property subject to conservation eas	ement is located 📂	
the organization have a written policy regarding the peri	iodic monitoring, inspection, handling of	0.022
·	***************************************	
and volunteer hours devoted to monitoring, inspecting, l	handling of violations, and enforcing cons	ervation easements during the year
unt of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservat	ion easements during the year
s each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170()	h)(4)(B)(i)
section 170(h)(4)(B)(ii)?		Yes No
art XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, and balance sheet, and
ide, if applicable, the text of the footnote to the organizati	ion's financial statements that describes t	he organization's accounting for
ervation easements.		
Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.
Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statem	ent and balance sheet works of art,
		· ·
·		
organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical
	•	•
•		> \$
		10 000
		Seen's broalds
allowing amounts required to be reported finder SEAS 15		
ollowing amounts required to be reported under SFAS 11 nue included on Form 990, Part VIII, line 1		> \$
	the organization's property, subject to the organization's the organization inform all grantees, donors, and donor a charitable purposes and not for the benefit of the donor of principal private benefit? Conservation Easements. Complete if the organization of conservation easements held by the organization. Preservation of land for public use (e.g., recreation or explored in a property and in the organization of the tax year. If number of conservation easements are certified historic structure of conservation easements are certified historic structure of conservation easements included in (c) acquired a did in the National Register and the National Register are of conservation easements modified, transferred, reliable of states where property subject to conservation easements it and volunteer hours devoted to monitoring, inspecting, hand as each conservation easement reported on line 2(d) above section 170(h)(4)(B)(ii)? and XIII, describe how the organization reports conservation easements. Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form the organization elected, as permitted under SFAS 116 (AS sures, or other similar assets held for public exhibition, expenses included in Form 990, Part XIII, line 1 Assets included in Form 990, Part XIII, line 1 Assets included in Form 990, Part X	Preservation of open space plete lines 2a through 2d if the organization held a qualified conservation contribution in the form of the tax year. Il number of conservation easements all acreage restricted by conservation easements all acreage restricted by conservation easements are certified historic structure included in (a) above of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure in the National Register above of conservation easements modified, transferred, released, extinguished, or terminated by the broad states where property subject to conservation easement is located here is the organization have a written policy regarding the periodic monitoring, inspection, handling of titions, and enforcement of the conservation easements it holds? If and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation according to the periodic monitoring, and enforcing conservation of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation according to the periodic monitoring to the periodic monitoring conservation according to the periodic monitoring to the periodic moni

		IL RIGHTS I				11366		Pare 2
Pa	rt III Organizations Maintaining C	collections of Ar	t, Historical Tre	asures, or Othe	er Similar Ass	ets (co	ntinuer	4)
3	Using the organization's acquisition, accessi	ion, and other records	s, check any of the f	iollowing that are a s	ignificant use of i	ts collect	ion iter	ns
	(check all that apply):							
а	X Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
C	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization's exe	mpt purpose in P	art XIII.		
5	During the year, did the organization solicit of	or receive donations o	of art, historical treas	sures, or other simila	r assets			
	to be sold to raise funds rather than to be ma					Yes		X No
Pa	rt IV Escrow and Custodia! Arran reported an amount on Form 990, Pa		ete if the organizatio	n answered "Yes" or	n Form 990, Part	IV, line 9,	or	
1a	Is the organization an agent, trustee, custodi	ian or other intermedi	ary for contributions	s or other assets not	included			
	on Form 990, Part X?					Yes	. [☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing table:					
			-			Amo	unt	
c	Beginning balance				1c			
d	Additions during the year							
e	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on Fe					Yes	Ε	No
b	If "Yes," exclain the arrangement in Part XIII.	Check here if the ex	planation has been	rovided on Part XIII	*******************************		[
Pai	rt V Endowment Funds. Complete i	if the organization an	swered "Yes" on Fo	rm 990, Part IV, line	10.			
		(a) Current year	(b) Prior (ear	(c) Two years back	(d) Three years ba	ck (e) F	our veal	rs back
1a	Beginning of year balance	1,328,942.	1,198,794.	1,162,434.	1,236,99	0.	1,188	3,331.
b	Contributions	16,975.	13,615.	10,017.	11,99	3.	32	2,273,
C	Net investment earnings, gains, and losses	-76,291.	177,312.	85,293,	-23,80	0.	7€	,186,
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	67,359.	60,779.	58,950.	62,74	9.	59	,800.
f	Administrative expenses							·
g	End of year balance	1,202,267,	1,328,942.	1,198,794.	1,162,43	4.	1,236	,990.
2	Provide the estimated percentage of the curr	rent year end balance	(line 1g. column (a)	held as:	· · · · ·		<u> </u>	
a	Board designated or quasi-endowment	,	%	,				
b	Permanent endowment 100.00	%						
-	Temporarily restricted endowment	%						
_	The percentages on lines 2a, 2b, and 2c show							
За	Are there endowment funds not in the posse		tion that are held an	d administered for the	ne organization			
	by:	•			3		Yes	No
	(i) unrelated organizations					3a	- 1	X
		***************************************					-	
b	if "Yes" on line 3a(ii), are the related organiza						-	
4	Describe in Part XIII the intended uses of the							
	t VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part X	line 10.			
	Description of property	(a) Cost or of			Accumulated	(d) B	ook val	ue
		basis (investm	1 ' '		preciation	(-, -		
1a	Land							
	Buildings							
	Leasehold improvements							
	Equipment							
	Other							
	Add lines 1a through 1e. (Column (d) must e		K column (B) line 11	ne i				0.

Schedule	D	Form	990	2018	
COL LOCA MILO	-	h Airin	900	2010	

Part VII Inv	estments -	Other S	ecurities.
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Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(0)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. b) must equal Form 990. Part x col. (B) line 12.			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of year market yelve
1,1	(b) Book value	(c) Welliod of Valuation. Cost of end-	Di-year market value
(1)			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(9)			
Fotal. Col. b) must equal Form 990 Part X col. B line 13.			-
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11d. See Form 990. Part X line 15	
	Description		(b) Book value
(1) ENDOWMENTS AND GIFT ANNUIT	IES DUE FROM	NRA FOUNDATION	2,558,868
(2) FIREARMS/MUSEUM COLLECTION			10,000
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990 Part X col. (B) line Part X Other Liabilities,	15.)		2,568,868
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
(a) Description of liability		(b) Book value	
1 Federal income taxes			
2 ANNUITIES PAYABLE		151,367.	
(3)			
[4]			
(5)			
(6)			
(6)			
(6) (7)		151,367.	

or anization'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

Schedule D (Form 990) 2018

PART X, LINE 2:

832054 10-29-18

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

> Attach to Form 990.

> Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

E2 112666

Employer identification number

MICH CIVIL	WIGHTD I	ABLERON LOND					77-1130003
Part I General Information on Grants a	and Assistance						
1 Does the organization maintain records	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selection	on
criteria used to award the grants or assi	stance?				_		X Yes No
2 Describe in Part IV the organization's pr	ocedures for mon	itoring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to	Domestic Organ	izations and Domestic	Governments. C	omplete if the orga	anization answered "	Yes" on Form 990, Part	IV, line 21, for any
recipient that received more than	\$5,000. Part II car	be duplicated if addit	ional space is neede	ed			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
THE INDEPENDENT INSTITUTE							
100 SWAN WAY, SUITE 200							
OAKLAND, CA 94621	94-3008370	5.01(C)3	6,632.	0.			2ND AMENDMENT RESEARCH
							RANTS TO NRA ARE MADE TO
NATIONAL RIFLE ASSOCIATION							UPPORT LITIGATION WHERE
11250 WAPLES MILL ROAD							THE LITIGATION IS
FAIRFAX, VA 22030	53-0116130	01(C)4	433,872.	0.			DIRECTLY RELATED TO THE
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization 	-	•					

MPA CIVIL DIGUTE DEFENCE FIND

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
2ND AMENDMENT RESEARCH	7	51,471.	0.		
LEGAL ASSISTANCE	24	222,357.	0.		
YOUTH ESSAY CONTEST	8	3,600.	0.		

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

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 1, COLUMN (H):

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization NRA CIVIL RIGHTS DEFENSE FUND Employer identification number 52-1136665

	rt I Questions Regarding Compensation		Yes	No
ta	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		Tes	NO
_	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel	Λ		
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			-11
	Discretionary spending account Personal services (such as maid, chauffeur, chef)	1,3		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		13	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	70		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		14	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
a	The organization?	5a		X
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	615		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53,4958-4(a)(3)? If "Yes," describe in Part III	8		X
	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6/c/?	9		

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

Schedule J (Form 990) 2018

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) ROBERT J. DOWLUT	(0)	0.	0.	0.	0.	0.	0.	0.
TRUSTEE	(10	154,070.	0.	0.	0.	0.	154,070.	0.
(2) CRAIG B. SPRAY	(i)	0.	0.	0.	0.	0.	0.	0.
TREASURER (BEGIN 09/18)	(6)	401,111.	0.	195,847.	16,500.	34,757.	648,215.	0.
(3) STEFAN TAHMASSEBI	(i)	0.	0.	0.	0.	0.	0.	0.
SECRETARY	(ii)	211,365.	0.	4,386.	16,607.	50,980.	283,338.	0.
(4) WILSON H. PHILLIPS JR.	(i)	0.	0.	0.	0.	0.	0.	0.
TREASURER ((END 09/18))	(ii)	573,567.	210,000.	116,970.	20,280.	27,952.	948,769.	0.
	(i)							
	(0)							
	(i)							
	(W)							
	(i)							
	(10)							
	(1)							
	(fi)							
	(i)							
	(11)							
	(1)							
	(11)							
	m							
	(ii)							
	(1)							
	(11)							
	(i)							
	(ii)							
	(i)							
	(11)							
	(i)							
	{ii}							
	(i)							
	(iii)							

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 Part II. Also complete this part 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 I. LINE 4B:

THE NRA TAKES A FULL TRANSPARENCY POSTURE FOR EXECUTIVE COMPENSATION. THIS

COMMENT PROVIDES CONTEXT FOR THE 457(B) AND 457(F) PLANS. THE RELATED

ORGANIZATION HAS AN EXECUTIVE 457(B) DEFERRED COMPENSATION RETIREMENT

BENEFIT PLAN FOR THE BENEFIT OF CERTAIN EMPLOYEES. THE 457(B) PLAN IS

EMPLOYEE FUNDED, NOT EMPLOYER FUNDED. THE RELATED ORGANIZATION ALSO HAS A

NONDUALIFIED 457(F) SUPPLEMENTAL INCOME RETIREMENT PLAN FOR THE BENEFIT OF

CERTAIN INDIVIDUALS. THE 457(F) PLAN IS EMPLOYER FUNDED. THE NRA DECIDES

THE BENEFIT AMOUNT AND TIMEFRAME FOR VESTING OF EACH PARTICIPANT USING

DIFFERENT FACTORS PARTICULAR TO EACH RELEVANT INDIVIDUAL AND HIS/HER

SPECIFIC DESIRED CIRCUMSTANCE. SERVICE COSTS INCLUDED IN DEFERRED

Schedule J Form 990 2018 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 Part II. Also complete this part for any additional information. COMPENSATION ARE ACTUARIALLY DETERMINED UNDER FASE ASC 715. THE 457(F) PLAN IS DESIGNED TO SUPPLEMENTAL THE CURRENT TAX QUALIFIED DEFINED BENEFIT PENSION PLAN WHERE CURRENT LIMITATIONS ON BENEFITS AND EMPLOYER CONTRIBUTIONS MAY BE INADEQUATE, AND AN EMPLOYER SPONSORED SUPPLEMENTAL INCOME PLAN CAN BEST PROVIDE THESE SELECTED EMPLOYEES WITH THE APPROPRIATE AMOUNT OF INCOME IN THE SPECIFIC DESIRED SITUATION. 457(F) PAYOUTS ARE PROPERLY INCLUDED IN TAXABLE WAGES AND REPORTED IN W-2 INCOME. MR. PHILLIPS RECEIVED \$73,978 457(F) DISBURSEMENT DURING THE YEAR. PART II COLUMN B(III): OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. PHILLIPS INCLUDED \$18,500 457(B) PLAN, \$73,978 457(F) DISBURSEMENT, \$21,012 GROUP LIFE INSURANCE, AND \$3,480 TAXABLE PERSONAL EXPENSES. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. SPRAY INCLUDED \$18,500 457(B) PLAN, \$2,173 GROUP LIFE INSURANCE, AND \$175,174

BENEFITS INCLUDE EMPLOYEE BENEFITS SUCH AS THE EMPLOYER PAID PORTIONS

	ıle J (Form 99			A CIVI	L RI	GHTS DI	SFENSE	FUND					52-1136	665	Page 3
Part II	Suppleme	ntal Info	ormation												
Provide	the informati	on, expl	lanation, or de	scriptions re	equired f	or Part I, line	s 1a, 1b, 3, 4	4a, 4b, 4c, 5a, 5b,	, 6a, 6b,	7, and 8, and for	Part II. Also co	mplete this pa	rt for any additi	onal informatio	n.
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

2018
Open to Public Inspection

Name of the organization

NRA CIVIL RIGHTS DEFENSE FUND

Employer identification number 52-1136665

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE FUND PROVIDES LEGAL AND FINANCIAL ASSISTANCE TO SELECTED INDIVIDUALS AND ORGANIZATIONS DEFENDING THEIR RIGHT TO KEEP AND BEAR ARMS. ADDITIONALLY, THE FUND SPONSORS LEGAL RESEARCH AND EDUCATION ON A WIDE VARIETY OF GUN-RELATED ISSUES, INCLUDING THE MEANING OF THE SECOND AMENDMENT. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: SECOND AMENDMENT. FORM 990, PART VI, SECTION 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 CORPORATE POLICIES, ANNUAL FILINGS MUST BE PROVIDED TO THE NRA OFFICE OF THE SECRETARY AND REVIEWED REGULARLY AND CONSISTENTLY.

FORM 990, PART VI, SECTION B, LINE 15:

THE NRA CIVIL RIGHTS DEFENSE FUND RELIED ON A RELATED ORGANIZATION'S

PROCESSES TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIALS. 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

Name of the organization NRA CIVIL RIGHTS DEFENSE FUND	Employer identification number 52-1136665
PROPERLY DOCUMENTED.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AK, AL, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, N	C, ND, NH, NJ, NM, NV
NY,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, AUDITED FINANCIAL STATEMENTS, AND ANN	UAL REPORTS ARE
MADE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF DISCLOS	URE AS SET FORTH
IN SECTION 6104(D). NRA CIVIL RIGHTS DEFENSE FUND DOES NOT	MAKE INTERNAL
OPERATING POLICIES AVAILABLE TO THE GENERAL PUBLIC.	
PART X, COLUMN (A): BEGINNING OF YEAR	
DUE TO/FROM RELATED PARTY ON PART X COLUMN (A) OF 2018 FOR	M 990 ARE
REVISED TO MATCH THE PRESENTATION OF THE AUDITED FINANCIAL	STATEMENT.
THE REVISION DOES NOT IMPACT TOTAL NET ASSETS AS OF DECEMB	ER 31, 2017
REPORTED ON PART X COLUMN (A) LINE 33.	

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.

rm 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

NRA CIVIL RIGHTS DEFENSE FUND

Employer identification number 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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	9) 512(b)(13) trolled tity?
	+			501(c)(3))		Yes	No
NATIONAL RIFLE ASSOCIATION OF AMERICA -							
53-0116130, 11250 WAPLES MILL ROAD, FAIRFAX,							
VA 22030	1 EMBERSHIP	VEW YORK	501(C)(4)		V/A		X
THE MRA FOUNDATION, INC 52-1710886							
11250 WAPLES MILL ROAD							
FAIRFAX, VA 22030	HARITABLE	ISTRICT OF COLUMBIA	501(C)(3)	INE 7	·RA		x
NRA FREEDOM ACTION FOUNDATION - 26-1277941							
11250 WAPLES MILL ROAD							
FAIRFAX, VA 22030	HARITABLE	IRGINIA	501(C)(3)	LINE 7	NRA		X
NRA SPECIAL CONTRIBUTION FUND - 23-7367534						+	
P.O. BOX 700	7						
RATON, NM 87740	HARITABLE	NEW MEXICO	501(C)(3)	LINE 7	FRA		x

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

Schedule R (Form 990) 2018

NRA CIVIL RIGHTS DEFENSE FUND

7.3	4.5
(a)	(b)
Name, address, and EIN	Primary activity
of related organization	
NRA POLITICAL VICTORY FUND - 52-1083020	
11250 WAPLES MILL ROAD	
FAIRFAX, VA 22030	PAC/SSF

(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section \$12(b)(13) controlled organization?		
		501(c)(3))		Yes	No	
IRGINIA	5 27		NRA		x	
			<u> </u>			
	[
				-		
				-		

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(I)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	1 ' '	ortionate ations?	Code V-UBI amount in box 20 of Schedule	managi	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
WBB INVESTMENTS, LLC - 32-0569014, 11250 WAPLES MILL		22	47.73	27.6							
RD FAIRFAX, VA 22030	NVESTMENT	DE	N/A	N/A	N/A	N/A	N/A		N/A	N/A	N/A
	-										
											-
	1										
				1							
						1					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	y Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(cont	(i) ction (b)(13) trolled til. 7
		cauntry)		ur trust)		433615		Yes	No
WINGATE CHURCH INSURANCE SERVICES INC									
11250 WAPLES MILL RD									
FAIRFAX, VA 22030	DEVELOPMENT PHASE	DE	N/A	CORP	N/A	N/A	N/A	X	
NRA HOLDINGS COMPANY INC - 02-0558658									
11250 WAPLES MILL RD		-							
FAIRFAX, VA 22030	MANAGEMENT SERVICES	DE	N/A	CORP	N/A	N/A	N/A	X	<u></u>
					-				_

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

	e line 1 if any entity is listed in Parts II, III, or IV of this schedule.						Yes	No
	tax year, did the organization engage in any of the following transaction							
a Receipt of	(i) interest, (ii) annuities, (iii) royalties, or (Iv) rent from a controlled en	tity	********************		**************************	. <u>1a</u>		X
b Gift, grant,	or capital contribution to related organization(s)		.,,		******************************	1b	X	-
	or capital contribution from related organization(s)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1c	X	<u> </u>
								X
e Loansork	pan guarantees by related organization(s)	***************************************			*******************************	1e		X
1 Dividends	from related organization(s)		-4117	***************************************	***************************************	1f		X
g Sale of ass	sets to related organization(s)	***************************************			····	19		X
h Purchase	of assets from related organization(s)	***************************************	***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	************************	_1h_		X
i Exchange	of assets with related organization(s)	***************************************	*******************************			1i		X
j Lease of fa	acilities, equipment, or other assets to related organization(s)			*************	*******************************	. 1		X
k Lease of ta	acilities, equipment, or other assets from related organization(s)	*******************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	^*************************************	*************************	1k		X
	ice of services or membership or fundralising solicitations for related or					. 11		X
	ce of services or membership or fundraising solicitations by related or		********************************				-	X
n Sharing of	facilities, equipment, mailing lists, or other assets with related organiz	ation(s)			***************************************	. 1n	X	<u> </u>
Sharing of	paid employees with related organization(s)	***************************************	***************************************			10	X	
	ement paid to related organization(s) for expenses						X	
q Reimburse	ement paid by related organization(s) for expenses			.,,		1q		X
						3.11		
r Other trans	sfer of cash or property to related organization(s)	***************************************				1r		X
	sfer of cash or property from related organization(s)					1s		X
2 If the answ	ver to any of the above is "Yes " see the instructions for information or	who must complete th	Is line, including covered t	elationships and trans	saction thresholds.			
	(a)	(b)	(c)		(d)			
	(a) Name of related organization	Transaction	Amount involved	Method	of determining amount	invalved		
		type (a-s)						
		_	422 254					
(1) NATION	AL RIFLE ASSOCIATION OF AMERICA	В	433,872.	CASH				
	1 TARRES H. A.		06.000					
(2) THE NR	A FOUNDATION, INC.	C	96,000.	CASH				
\$73 m T () \$1	AL DIGIG AGGGGTAMION OF AMEDICA		20 241	C 3 CTT				
(3) NATION	AL RIFLE ASSOCIATION OF AMERICA	P	39,341.	CASH				
(4)								
-								
151								
(6)				l				

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

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

(a)	(b)	(c)	{d}	(e)		(f)	(g)	()	1)	(1)	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners si 501 (c) (3 or 15.7 Yes: N	ec)	Share of total income	Share of end-of-year assets	Dispr lior alloca	opor- ute lions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managir artner	Percentage ownership
								1.00		,	103 14	•
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-												
					+			-				-
]	
	-				-			-	_			
					1							
					+			-				

Schedule R Form 990 2018 NRA CIVIL RIGHTS DEFENSE FUND	52-1136665 Page 5
Part VII Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.	
Provide additional information for resilionses to destions on Schedule R. See instructions,	
PART III	
MODE THIS CONTENTION IS C. WAS EARNED IN CONTESTION WITH A DO	CCTDIP
WBB INVESTMENTS, LLC WAS FORMED IN CONNECTION WITH A PO	SSIBLE
TRANSACTION THAT WAS NEVER ULTIMATELY EXECUTED. A CERT	IFICATE OF
ALVOELLA MICHAEL MAN ELLED DA DIGGOLUS DUE GOLDANI	
CANCELLATION HAS BEEN FILED TO DISSOLVE THE COMPANY.	