Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Department of the Treasury

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.

Open to Public Inspection

| B Check if applicable: C Name of organization NATIONAL RIFLE ASSOCIATION OF AMERICA D Employer identification number Indires change Number and street (pr 0. box if mail is not delivered to street address) Room/suite ETelephone number Intra return 11250 WAPLES MILL ROAD Room/suite ETelephone number (703) 267-1000 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts 5 302,740.488 Amended return FAIRFAX, VA 22030 F Name and address of principal officer: WAYNE R LAPIERRE H(a) is the agroup return for subclineter? Yee IP Ne I Tax-exempt status: 501(c)(2 501(c) (4 4 (neert no.) 4947(a)(1) or 527 I Tax-exempt status: 501(c)(2 501(c) (4 4 (neert no.) 14947(a)(1) or 137 M State of legal domicile: NY Part I Summary Summary Summary 1 Briefly describe the organization's mission or most significant activities: FIREAMS SAFETY, EDUCATION, AND TRAINING: AND ADVOCACY ON BEHALF OF SAFE AND RESPONSIBLE GUN OWNERS 5 770 Total number of voting members of the governing body (Part VI, line 1a) 4 66 5 Total number of indindividuals emolypoyed in | A | | 2019 calen | dar year, or tax year beginning , 2019, and en | dina | | | , 20 | | | | | | |
|---|---------------|----------|---------------|---|---------|--------------------|----------------|-------------------------|--|--|--|--|--|--|
| Address change Doing business as 53-0116130 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number (703) 267-1000 Initial return City or town, state or province, country, and 2IP or foreign postal code G cross receipts 3 302,740.488 Application pending F Neme and address of principal officer: WAYNE R LAPIERRE H(a) is the a group stat for subordinates? Yee S No J Tax-scent status: S01(c)(4) < (insert no.) 494/(q)(1) or 1627 Web No. Why, attata b atta (see insert included?) Yee S No J Tax-scent status: S01(c)(4) < (insert no.) 494/(q)(1) or 1627 Web No. Why, attata b atta (see instructions) Why, NA and aubordinates included?) Yee S No J Tax-scent status: S01(c)(4) < (insert no.) 494/(q)(1) or 1627 Web No. Why, attata b atta (see instructions) Why, NA and aubordinates included? Yee No. Part I Summary Sumber of volung members of the governing body (Part VI, line 1a) <th></th> <th>-</th> <th></th> <th colspan="11"></th> | | - | | | | | | | | | | | | |
| Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Instal return I1250 VAPLES MILL ROAD (703) 267-1000 Gross receipts \$ 302,740,488 Application pending F Name and address of principal officer: WAYNE R LAPIERRE H(a) is the a grop return for subordinates includer? Ves I No Vestor Mark AS C ABOVE H(b) Are all subordinates includer? Ves I No Vestor Vestor No SAME AS C ABOVE H(b) Are all subordinates includer? Ves I No Vestor Vestor No SAME AS C ABOVE H(c) Grops exemption number > H(c) Grops exemption number > Vestor Vestor No SAME AS C ABOVE H(c) Group exemption number > N Vestor Vestor No SAME AS C ABOVE H(c) Group exemption number > N Vestor Vestor Corporation True Association Other > L Veer of formation: 1871 M State of legal domicile: NY Participation Corporation True Association Group exemption number > 1 Science association 1870 1 Brefely descr/ | | | | | | | | | | | | | | |
| Initial return 11250 WAPLES MILL ROAD (703) 267-1000 Image: Initial return/terminated City or town, state or province, country, and ZIP or foreign postal code 0 Gross receipts \$ 302,740,488 Amended return/terminated FARREAX, VA 2200 0 Gross receipts \$ 302,740,488 Application pending FName and address of principal officer: WAYNE R LAPIERRE H(a) Is the apop return for subordinates included? Yes No I Tax-exempt status: Soft(c)() 9 (0) (1 + (1 + (1 + (1 + (1 + (1 + (1 + (1 | | | - | | Poor | n/suito | E Tolon | | | | | | | |
| □ Final return/terminated City or town, state or province, country, and ZIP or foreign postal code □ | | | U | | HUUI | n/Suite | | | | | | | | |
| Amended return FAIREAX, VA 22030 G Gross receipts \$ 302,740,488 Amended return FName and address of principal officer: WAYNE R LAPIERRE H(a) is this a goup neturn for subordinate? Yes No Image: Status: S01(c)(3) 501(c)(4) 4 (insert no.) 4947(a)(1) or 527 H(b) is this a goup neturn for subordinate? Yes No Image: Status: S01(c)(3) 501(c)(4) 4 (insert no.) 4947(a)(1) or 527 H(c) Group asemption number > Kord or granization: Corporation: NY Image: Status: Solid (c) | | | | | | | | (703) 207-1000 | | | | | | |
| □ Application pending F Name and address of principal officer: WAYNE R LAPIERRE SAME AS C ABOVE H(a) Is this agroup return for subordinates? □ Yes □ No H(b) Are all subordinates included? □ Yes □ No H(c) Group exemption number ▶ J Website: ▶ WWW.NRA.ORG H(c) Group exemption number ▶ Its ics is instructions) PartII Summary Its ics is instructions 1871 M State of legal domicilie: NY PartII Summary Its instructions is significant activities: FIREARMS SAFETY, EDUCATION, AND TRAINING: AND ADVOCACY ON BEHALF OF SAFE AND RESPONSIBLE GUN OWNERS 3 73 2 Check this box ▶ □ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 73 3 Number of independent voting members of the governing body (Part VI, line 1a) | | | | | | | G Gross | receipte \$ 202 740 499 | | | | | | |
| SAME AS C ABOVE H(b) Are all subordinates included? ↓ Yes ↓ Not web all subordinates included? ↓ Yes ↓ Y | | | | | | LI(a) la thia a gr | | | | | | | | |
| I Tax-exempt status: 501(c)(3) ✓ 501(c)(4) ◄ (insert no.) 4947(a)(1) or 527 If "No." attach a list. (see instructions) J Website: WWW.NRA.ORG If "No." attach a list. (see instructions) Form of organization: © Corporation Trust Association Other > L Year of formation: 1871 M State of legal domicile: NY Part I Summary I Briefly describe the organization ission or most significant activities: FIREARMS SAFETY, EDUCATION, AND 2 Check this box > If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of individuals employed in calendar year 2019 (Part VI, line 1a) 4 63 4 Number of individuals employed in calendar year 2019 (Part V, line 2a) 5 770 6 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 7b 0 7 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 7b 7b 0 7 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 7b 7b 0 0 0 0 0 0 0 0 0 </th <th></th> <th>Applicat</th> <th>tion pending</th> <th></th> <th></th> | | Applicat | tion pending | | | | | | | | | | | |
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| 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 48,748,942 42,668,528 12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) 352,550,864 291,155,464 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 75,661 103,491 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 63,864,842 56,740,325 16a Professional fundraising fees (Part IX, column (A), line 11e) | nue | | | | | | | | | | | | | |
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| 12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) 352,550,864 291,155,464 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 75,661 103,491 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 5–10) 63,864,842 56,740,325 16a Professional fundraising fees (Part IX, column (A), line 11e) 7,798,658 5,269,873 b Total fundraising expenses (Part IX, column (D), line 25) 45,441,923 283,536,156 241,273,626 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 283,536,156 241,273,626 303,387,315 19 Revenue less expenses. Subtract line 18 from line 12 (2,724,453) (12,231,851) 19 Total assets (Part X, line 16) 197,212,080 198,746,752 21 Total liabilities (Part X, line 26) 181,180,554 189,092,595 22 Net assets or fund balances. Subtract line 21 from line 20 16,031,526 9,654,157 | č | 11 | | | | | | | | | | | | |
| 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 75,661 103,491 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 63,864,842 56,740,325 16a Professional fundraising fees (Part IX, column (A), line 11e) 7,798,658 5,269,873 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 45,441,923 45,441,923 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 283,536,156 241,273,626 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . 355,275,317 303,387,315 19 Revenue less expenses. Subtract line 18 from line 12 | | 12 | | | | | | | | | | | | |
| 14Benefits paid to or for members (Part IX, column (Å), line 4)015Salaries, other compensation, employee benefits (Part IX, column (Å), lines 5–10)63,864,84256,740,32516aProfessional fundraising fees (Part IX, column (Å), line 11e)7,798,6585,269,873bTotal fundraising expenses (Part IX, column (D), line 25)45,441,923717Other expenses (Part IX, column (Å), lines 11a–11d, 11f–24e)283,536,156241,273,62618Total expenses. Add lines 13–17 (must equal Part IX, column (Å), line 25)355,275,317303,387,31519Revenue less expenses. Subtract line 18 from line 12(2,724,453)(12,231,851)20Total assets (Part X, line 16)197,212,080198,746,75221Total liabilities (Part X, line 26)181,180,554189,092,59522Net assets or fund balances. Subtract line 21 from line 2016,031,5269,654,157 | | 13 | | | | , | 75,661 | | | | | | | |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 63,864,842 56,740,325 16a Professional fundraising fees (Part IX, column (A), line 11e) 7,798,658 5,269,873 b Total fundraising expenses (Part IX, column (D), line 25) 45,441,923 0 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 283,536,156 241,273,626 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 355,275,317 303,387,315 19 Revenue less expenses. Subtract line 18 from line 12 (2,724,453) (12,231,851) 20 Total assets (Part X, line 16) 197,212,080 198,746,752 21 Total liabilities (Part X, line 26) 181,180,554 189,092,595 22 Net assets or fund balances. Subtract line 21 from line 20 16,031,526 9,654,157 | | | | | | | 0 | 0 | | | | | | |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) 7,798,658 5,269,873 b Total fundraising expenses (Part IX, column (D), line 25) 45,441,923 283,536,156 241,273,626 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 283,536,156 241,273,626 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 355,275,317 303,387,315 19 Revenue less expenses. Subtract line 18 from line 12 (2,724,453) (12,231,851) 20 Total assets (Part X, line 16) 197,212,080 198,746,752 21 Total liabilities (Part X, line 26) 181,180,554 189,092,595 22 Net assets or fund balances. Subtract line 21 from line 20 16,031,526 9,654,157 | s | 15 | | | | 63,8 | 364,842 | 56,740,325 | | | | | | |
| 17 Other expenses (Part X, Column (A), lines Tra-Trd, Tri-24e) 283,336,156 241,273,026 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 355,275,317 303,387,315 19 Revenue less expenses. Subtract line 18 from line 12 (2,724,453) (12,231,851) 10 Total assets (Part X, line 16) 197,212,080 198,746,752 21 Total liabilities (Part X, line 26) 181,180,554 189,092,595 22 Net assets or fund balances. Subtract line 21 from line 20 16,031,526 9,654,157 | nse | 16a | Profession | al fundraising fees (Part IX, column (A), line 11e) | | 7,7 | 798,658 | 5,269,873 | | | | | | |
| 17 Other expenses (Part X, Column (A), lines Tra-Trd, Tri-24e) 283,336,156 241,273,026 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 355,275,317 303,387,315 19 Revenue less expenses. Subtract line 18 from line 12 (2,724,453) (12,231,851) 10 Total assets (Part X, line 16) 197,212,080 198,746,752 21 Total liabilities (Part X, line 26) 181,180,554 189,092,595 22 Net assets or fund balances. Subtract line 21 from line 20 16,031,526 9,654,157 | gei | b | Total fundr | aising expenses (Part IX, column (D), line 25) ► 45,441,923 | 3 | | | | | | | | | |
| 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 355,275,317 303,387,315 19 Revenue less expenses. Subtract line 18 from line 12 (2,724,453) (12,231,851) 19 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 197,212,080 198,746,752 21 Total liabilities (Part X, line 26) 181,180,554 189,092,595 22 Net assets or fund balances. Subtract line 21 from line 20 16,031,526 9,654,157 | ш | 17 | | | | 283,5 | 536,156 | 241,273,626 | | | | | | |
| I9 Revenue less expenses. Subtract line 18 from line 12 (2,724,453) (12,231,851) Image: Stress of the system Image: Str | | 18 | | | | 355,2 | 275,317 | 303,387,315 | | | | | | |
| | | 19 | Revenue le | ess expenses. Subtract line 18 from line 12 | (2,7) | 24,453) | (12,231,851) | | | | | | | |
| | or | | | | Beg | ginning of Curr | ent Year | End of Year | | | | | | |
| | sets | 20 | Total asset | s (Part X, line 16) | | 197,2 | 12,080 | 198,746,752 | | | | | | |
| | t As: d Ba | 21 | Total liabili | ties (Part X, line 26) | | 181,1 | 80,554 | 189,092,595 | | | | | | |
| Part II Signature Block | a n | 22 | Net assets | or fund balances. Subtract line 21 from line 20 | | 16,0 | 31,526 | 9,654,157 | | | | | | |
| | Pa | art II | Signatu | re Block | | | | | | | | | | |

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

| Sign Here | Signature of officer WAYNE R LAPIERRE, EXECUTIVE V Type or print name and title | /ICE PRESIDENT | | Date | • | | | | | |
|--|---|----------------------|------|------|---|------|--|--|--|--|
| Paid Preparer | Print/Type preparer's name | Preparer's signature | Date | Date | | PTIN | | | | |
| Use Only | Firm's name | Firm's EIN ► | | | | | | | | |
| Use Only | Firm's address ► | Phone no. | | | | | | | | |
| May the IRS discuss this return with the preparer shown above? (see instructions) | | | | | | | | | | |
| For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2019) | | | | | | | | | | |

| | 90 (2019) Page | | | | | | | | |
|-----------|--|--|--|--|--|--|--|--|--|
| Part | III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III | | | | | | | | |
| 1 | Briefly describe the organization's mission: | | | | | | | | |
| • | PER NRA BYLAWS, TO PROTECT AND DEFEND THE U.S. CONSTITUTION; TO PROMOTE PUBLIC SAFETY, LAW AND | | | | | | | | |
| | ORDER, AND NATIONAL DEFENSE; TO TRAIN LAW ENFORCEMENT AGENCIES AND CIVILIANS IN MARKSMANSHIP; TO | | | | | | | | |
| | PROMOTE SHOOTING SPORTS AND HUNTING. | | | | | | | | |
| | | | | | | | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | | | | | | | | |
| | prior Form 990 or 990-EZ? | | | | | | | | |
| | If "Yes," describe these new services on Schedule O. | | | | | | | | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program | | | | | | | | |
| | services? | | | | | | | | |
| | If "Yes," describe these changes on Schedule O. | | | | | | | | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured be expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported. | | | | | | | | |
| 4a | (Code:) (Expenses \$ 121,344,093 including grants of \$ 103,491) (Revenue \$ 120,556,156) | | | | | | | | |
| | NRA MEMBERSHIP SUPPORT INCLUDES PUBLICATIONS, EDUCATION AND TRAINING, FIELD SERVICES, COMPETITIVE | | | | | | | | |
| | SHOOTING, LAW ENFORCEMENT, HUNTER SERVICES, MEMBER COMMUNICATIONS SERVICES, MEMBER PROGRAMS, MEMBER | | | | | | | | |
| | SERVICES, AND FULFILLMENT OF MEMBER SERVICES. THE CHIEF VALUE OF NRA MEMBERSHIP IS IN GUN SAFETY AND | | | | | | | | |
| | TRAINING ALONG WITH REGULAR REINFORCEMENT OF THESE LESSONS AND PRINCIPLES BY KEEPING ENGAGED WITH | | | | | | | | |
| | THE COMMUNITY OF OUTDOOR LOVERS AND SAFE AND RESPONSIBLE SHOOTING ENTHUSIASTS. NRA MEMBERSHIP | | | | | | | | |
| | SUPPORT AND FULFILLMENT ARE DEDICATED TO PROVIDING NRA MEMBERS WITH HIGH QUALITY SUPPORT AS WELL AS | | | | | | | | |
| | CONTENT DELIVERED THROUGH MANY PLATFORMS. SAFE AND RESPONSIBLE GUN OWNERSHIP REMAINS THE CORNERSTONE OF EVERYTHING THE ASSOCIATION PROVIDES FOR MEMBERS. | | | | | | | | |
| | OF EVENTIFIING THE ASSOCIATION PROVIDES FOR MEMBERS. | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 4b | (Code:) (Expenses \$27,138,998 including grants of \$0) (Revenue \$0) | | | | | | | | |
| | THE NRA INSTITUTE FOR LEGISLATIVE ACTION ADVOCATES ON BEHALF OF SAFE AND RESPONSIBLE GUN OWNERS. AS | | | | | | | | |
| | THE FOREMOST PROTECTOR AND DEFENDER OF THE SECOND AMENDMENT, THE NRA PROMOTES FIREARMS SAFETY, | | | | | | | | |
| | ADVOCATES AGAINST EFFORTS TO ERODE GUN RIGHTS AND FREEDOMS, FIGHTS FOR INITIATIVES AIMED AT REDUCING | | | | | | | | |
| | VIOLENT CRIME, AND PROMOTES HUNTERS'RIGHTS AND CONSERVATION EFFORTS. NRA MEMBERS RECOGNIZE THIS | | | | | | | | |
| | VITAL IMPORTANCE OF NRAILA'S TRUE GRASSROOTS WORK TO PRESERVE THE SECOND AMENDMENT FOR FUTURE | | | | | | | | |
| | GENERATIONS OF SHOOTERS AND OUTDOOR SPORTSMEN AND SPORTSWOMEN. THIS LEGION OF ENGAGED AND MOTIVATED | | | | | | | | |
| | MEMBERS IS THE REASON FOR THE NRA'S STRENGTH. | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 4c | (Code:) (Expenses \$ 16,001,367 including grants of \$ 0) (Revenue \$ 19,828,137) | | | | | | | | |
| | NRA SHOWS AND EXHIBITS INCLUDE THE NRA ANNUAL MEETINGS AND MEMBERS EXHIBIT HALL, HELD IN A DIFFERENT | | | | | | | | |
| | CITY EACH YEAR, AND OTHER SHOWS AROUND THE COUNTRY. THE ANNUAL MEETINGS AND EXHIBITS ARE PRESENTED | | | | | | | | |
| | AS A CELEBRATION OF AMERICAN FREEDOM FEATURING ACRES OF EXHIBITS, PREMIER EVENTS, EDUCATIONAL | | | | | | | | |
| | SEMINARS AND WORKSHOPS, AND FUN-FILLED ACTIVITIES FOR THE ENTIRE FAMILY. INDIANAPOLIS, INDIANA WAS | | | | | | | | |
| | THE 2019 HOST CITY. OTHER NRA HOSTED SHOWS INCLUDED THE GREAT AMERICAN OUTDOOR SHOW HELD IN | | | | | | | | |
| | HARRISBURG, PENNSYLVANIA. | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 4d | Other program services (Describe on Schedule O.) | | | | | | | | |
| | (Expenses \$ 31,766,483 including grants of \$ 0) (Revenue \$ 564,907) | | | | | | | | |
| 4e | Total program service expenses 196,250,941 | | | | | | | | |
| | Form 990 (201 | | | | | | | | |

| Form 99 | 0 (2019) | | F | Page 3 | | | | |
|---------|---|-----|-----|---------------|--|--|--|--|
| Part | V 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)? <i>If "Yes," complete Schedule A</i> | 1 | | ~ | | | | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | ~ | | | | | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | 3 | ~ | | | | | |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | 4 | | | | | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> | 5 | ~ | | | | | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i> | | | | | | | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | 7 | | ~ | | | | |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | 8 | ~ | | | | | |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> . | 9 | | ~ | | | | |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> . | 10 | ~ | | | | | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | | | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | ~ | | | | | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> | 11b | | ~ | | | | |
| с | Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> . | 11c | | r | | | | |
| 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? <i>If "Yes," complete Schedule D, Part IX</i> | 11d | ~ | | | | | |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | ~ | L | | | | |
| 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)? <i>If "Yes," complete Schedule D, Part X</i> | 11f | ~ | | | | | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | ~ | | | | | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | ~ | | | | | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | ~ | | | | |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | ~ | | | | |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i> | 14b | ~ | | | | | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> | 15 | | ~ | | | | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i> | 16 | | ~ | | | | |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions) | 17 | ~ | | | | | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> . | 18 | ~ | | | | | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | 19 | | ~ | | | | |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | ~ | | | | |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | | | | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | 21 | ~ | | | | | |

| Form 990 (2019) |
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| Part | IV Checklist of Required Schedules (continued) | | | |
|----------|---|------------|-----|----|
| | | | Yes | No |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 | ~ | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . | 23 | ~ | |
| 24a b | 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> | 24a 24b | | ~ |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If "Yes," complete Schedule L, Part I</i> | 24d 25a | ~ | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . | 25b | ~ | |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> | 26 | | ~ |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | ~ |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): | | | |
| a | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV | 28a | ~ | ~ |
| b C | A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> | 28b 28c | | ~ |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | ~ | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | ~ | |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | ~ |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | ~ |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i> | 33 | | ~ |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | ~ | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | ~ | |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. | 35b | ~ | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | 37 | | ~ |
| 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 | ~ | |
| Part | V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a b | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable1968Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable10 | - | | |
| с | Did the organization comply with backup withholding rules for reportable payments to vendors and | 1- | ~ | |
| | reportable gaming (gambling) winnings to prize winners? | 1c | • | |

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Form **990** (2019)

| Form 990 (2019) Page 5 | | | | | | | | | |
|-------------------------------|---|----------|-----|----|--|--|--|--|--|
| Part | V Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | | | | | | |
| | | | Yes | No | | | | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | | | | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return 2a 770 | | | | | | | | |
| b | 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) | | | | | | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | V | | | | | | |
| b | b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O . | | | | | | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, | | | | | | | | |
| | a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | | | | | | | |
| b | | | | | | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | ~ | | | | | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | ~ | | | | | |
| С | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | | | | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | | | | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | V | | | | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | | | | | | |
| | gifts were not tax deductible? | 6b | ~ | | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | | | | | | | |
| | and services provided to the payor? | 7a | | | | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | | | | | |
| С | | | | | | | | | |
| | required to file Form 8282? | 7c | | | | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | | | | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e 7f | | | | | | | |
| f | | | | | | | | | |
| g | | | | | | | | | |
| | h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | | | | | | | |
| ð | 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? | | | | | | | | |
| 9 | Sponsoring organization have excess business nothings at any time during the years | 8 | | | | | | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | | | | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | 0.5 | | | | | | | |
| 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 . 10b | | | | | | | | |
| 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.) | | | | | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | | | |
| 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 | | | | | | | | |
| C | | | | | | | | | |
| 14a | | | | | | | | | |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O . | 14b | | | | | | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | 15 | | | | | | | |
| | excess parachute payment(s) during the year? | 19 | ~ | | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | V | | | | | |
| | If "Yes," complete Form 4720, Schedule O. | | | - | | | | | |

Form **990** (2019)

| Form 99 | 90 (2019) | | F | Page 6 | | | | |
|-------------|---|-------|-------|---------------|--|--|--|--|
| Part | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. | | for a | "No" | | | | |
| | Check if Schedule O contains a response or note to any line in this Part VI | | | ~ | | | | |
| Secti | ion A. Governing Body and Management | | | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a 73 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. | | Yes | No | | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent . 1b 63 | | | | | | | |
| 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? | | | | | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . | 3 | | ~ | | | | |
| 4 5 6 | 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | | | | | | | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | ~ | | | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | ~ | | | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | | | | |
| а | The governing body? | 8a | ~ | | | | | |
| b | | | | | | | | |
| 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? <i>If "Yes," provide the names and addresses on Schedule O</i> | 9 | | ~ | | | | |
| Secti | ion B. Policies (This Section B requests information about policies not required by the Internal Rever | nue C | , | 1 | | | | |
| | | | Yes | No | | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | ~ | | | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | 10b | | | | | | |
| 11a | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | | | | | | | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | 11a | | ~ | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | ~ | | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | V | | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | ~ | | | | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | ~ | | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | ~ | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | ~ | | | | | |
| b | Other officers or key employees of the organization | 15b | ~ | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | | | | | |
| b | with a taxable entity during the year? | 16a | | | | | | |
| | 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 | | | | | | |
| | ion C. Disclosure | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed AL, AR, AZ, CA, (CONTINUED ON SCH | | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website I Upon request Other (explain on Schedule O) | , | | | | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or and financial statements available to the public during the tax year. | | | olicy, | | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and re CRAIG B. SPRAY, TREASURER, 11250 WAPLES MILL RD, FAIREAX, VA 22030, (703) 267-1000 | cords | | | | | | |

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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. See instructions for the order in which to list the persons above.

See instructions for the order in which to list the persons above.

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

| | | (C) | | | | | | | | |
|--------------------------------------|---|---|-----------------------|---------|-----------------------|------------------------------|--------|---|--|---|
| (A) | (B) | Position | | | | | | (D) | (E) | (F) |
| Name and title | Average | (do not check more than one box, unless person is both an | | | | | | Reportable | Reportable | Estimated amount |
| | hours | office | | | d a director/trustee) | | | compensation | compensation | of other |
| | per week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (1) WAYNE R LAPIERRE | 60.0 | | | | | | | | | |
| EXECUTIVE VICE PRESIDENT | 1.0 | | | ~ | | | | 1,810,571 | 0 | 74,138 |
| (2) CHRIS COX | 58.0 | | | | | | | 11- | | , |
| EXECUTIVE DIRECTOR ILA 6/26/2019 | 1.0 | | | V | | | | 1,512,582 | 0 | 59,943 |
| (3) OLIVER L NORTH | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 1.0 | ~ | | | | | | 986,015 | 0 | 0 |
| (4) JOSHUA L POWELL | 50.0 | | | | | | | | | |
| CHIEF OF STAFF AND SENIOR STRATEGIST | 0.0 | | | | | ~ | | 858,930 | 0 | 76,151 |
| (5) CRAIG B SPRAY | 37.0 | | | | | | | | | |
| TREASURER | 13.0 | | | ~ | | | | 805,711 | 0 | 70,027 |
| (6) TYLER SCHROPP | 50.0 | | | | | | | | | |
| EXECUTIVE DIRECTOR, ADVANCEMENT | 0.0 | | | | | ~ | | 801,340 | 0 | 68,673 |
| (7) TODD GRABLE | 50.0 | | | | | | | | | |
| EXECUTIVE DIRECTOR, MEMBERSHIP | 0.0 | | | | ~ | | | 636,832 | 0 | 65,109 |
| (8) DOUG HAMLIN | 50.0 | | | | | | | | | |
| EXECUTIVE DIRECTOR, PUBLICATIONS | 0.0 | | | | ~ | | | 616,832 | 0 | 79,582 |
| (9) WILSON H PHILLIPS | 1.5 | | | | | | | | | |
| FORMER TREASURER 9/13/2018 | 0.0 | | | | | | ~ | 659,386 | 0 | 4,985 |
| (10) DAVID LEHMAN | 50.0 | | | | | | | | | |
| DEPUTY EXECUTIVE DIRECTOR 9/13/2019 | 1.0 | | | | | ~ | | 635,736 | 0 | 23,920 |
| (11) JOHN C FRAZER | 50.0 | | | | | | | | | |
| SECRETARY | 0.0 | | | ~ | | | | 414,585 | 0 | 75,884 |
| (12) JOSEPH P DEBERGALIS, JR | 50.0 | | | | | | | | | |
| EXECUTIVE DIRECTOR GO | 0.0 | | | ~ | | | | 422,340 | 0 | 54,016 |
| (13) JASON OUIMET | 40.0 | | | | | | | | | |
| EXECUTIVE DIRECTOR ILA | 1.0 | | | ~ | | | | 397,104 | 0 | 65,164 |
| (14) THOMAS R TEDRICK | 30.0 | | | | | | | | | |
| MANAGING DIRECTOR FINANCE | 20.0 | | | | | ~ | | 397,314 | 0 | 45,123 |

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| Part VII Section A. Officers, Directors, 1 | Trustees, | Key I | Emj | ploy | yee | s, an | d F | lighest Compe | nsated Emplo | yees (continued) |
|--|--|----------------------|------|-------------|-----|-----------------------------|------|---|--|---|
| (A) Name and title | (B) Average | | | Pos neck | | e than o | | (D) Reportable | (E) Reportable | (F) Estimated amount |
| | hours per week (list any hours for related organizations below dotted line) | office or directo | | | | or/true Highest compensated | | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MISC) | of other compensation from the organization and related organizations |
| (15) JOHN G PERREN | 37.5 | | | | | | | | | |
| SR. ADVISOR TO THE EVP | 0.0 | | | | | ~ | | 359,906 | 0 | 12,296 |
| (16) ROBERT K WEAVER | 0.0 | | | | | | | | | |
| FORMER EXECUTIVE FORMER DIRECTOR GO 10/25/2016 | 0.0 | | | | | | V | 240,000 | 0 | 0 |
| (17) MARION P HAMMER | 5.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 220,350 | 0 | 0 |
| (18) DAVID A KEENE | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 57,592 | 0 | 0 |
| (19) TED NUGENT | 5.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 45,474 | 0 | 0 |
| (20) DAVE BUTZ | 5.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 21,000 | 0 | 0 |
| (21) JULIE GOLOB | 1.0 | | | | | | | | | |
| BOARD DIRECTOR 8/11/2019 | 0.0 | ~ | | | | | | 16,119 | 0 | 0 |
| (22) LANCE OLSON | 5.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 15,000 | 0 | 0 |
| (23) BART SKELTON | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 13,750 | 0 | 0 |
| (24) OWEN BUZ MILLS | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 6,852 | 0 | 0 |
| (25) (SEE STATEMENT) | | - | | | | | | | | |
| 1b Subtotal | | | | | | | | 11,951,321 | 0 | 775,011 |
| c Total from continuation sheets to Part | VII, Sectio | n A | | | | | | 2,465 | 0 | 0 |
| | | | | | | | | 11,953,786 | 0 | 775,011 |
| 2 Total number of individuals (including but | t not limited | d to th | iose | e list | ted | above | e) w | ho received mor | e than \$100,000 | of |

Part VII - Section A. Officere Directore Tructoce Key Employees and Highest Compensated Er

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,00 reportable compensation from the organization ► 149

- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*.
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|--|---------------------------------------|----------------------------|
| BREWER ATTORNEYS AND COUNSELORS, 1717 MAIN ST, SUITE 5900, DALLAS, TX 75201 | LEGAL SERVICES | 24,789,326 |
| INFOCISION MANAGEMENT CORP, 325 SPRINGSIDE DR, AKRON, OH 44333 | MEMBERSHIP PROCESSING AND CONTROL | 21,723,870 |
| MEMBERSHIP MARKETING PARTNERS LLC, 11250 WAPLES MILL TD, SUITE 310, FAIRFAX, VA 22030 | FUNDRAISING PRINTING AND MAILING | 11,560,154 |
| VALTIM INC, 1095 VENTURE DR, FOREST, VA 24551 | FULFILLMENT CENTER | 8,957,907 |
| ACKERMAN MCQUEEN INC, 1601 NW EXPRESSWAY, OKLAHOMA CITY, OK 73118 | PUBLIC RELATIONS AND ADVERTISING | 7,317,206 |
| 2 Total number of independent contractors (including but not limited to | o those listed above) who | |
| received more than \$100,000 of compensation from the organization \blacktriangleright | 141 | |

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Yes

~

V

~

3

4

5

No

nlover (continued)

Part VIII Statement of Revenue

| | | | 0.00 | | spor | ise of note to an | ly line in this Pa | rt VIII.... | | 🖌 |
|--|----------|---|----------|---------------|----------|--|-----------------------------|---|---|---|
| | | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 |
| its ts | 1a | Federated campaig | ns . | | 1a | 0 | | | | |
| oun | b | Membership dues | | | 1b | 0 | | | | |
| μ G μ C C C C C C C C C C C C C | С | Fundraising events | | | 1c | 0 | | | | |
| ar / | d | Related organization | | | 1d | 13,703,287 | | | | |
| nii G | | Government grants | | - | 1e | 0 | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | f | All other contribution and similar amounts no | ot inclu | uded above | 1f | 95,736,153 | | | | |
| G tip | g | Noncash contributio | | | | • • • • • • • • • • • • • • • • • • • | | | | |
| Son and | b | lines 1a–1f Total. Add lines 1a- | | | 1g | | 100 420 440 | | | |
| • | п | Total. Add lines Ta- | -11 . | | • | Business Code | 109,439,440 | | | |
| ő | 2a | MEMBER DUES | | | | 813410 | 112,969,564 | 112,969,564 | 0 | C |
| Program Service Revenue | b | | | | | 813410 | 21,042,172 | 21,042,172 | 0 | 0 |
| Jram Ser Revenue | c | | | | | 010410 | 0 | 0 | 0 | (|
| E S | d | | | | | | 0 | 0 | 0 | (|
| gra Re | e | | | | | | 0 | 0 | 0 | 0 |
| Š. | f | All other program se | | | | | 0 | 0 | 0 | 0 |
| - | g | Total. Add lines 2a- | | | | | 134,011,736 | | · · · · · | |
| | 3 | Investment income | | | | | ,, | | | |
| | • | other similar amoun | | | | | 3,926,185 | 0 | 0 | 3,926,185 |
| | 4 | Income from investr | | | | | 0 | 0 | 0 | 0 |
| | 5 | Royalties | | | | 13,081,645 | 0 | 0 | 13,081,645 | |
| | | 2 | | (i) Real | | (ii) Personal | | | | |
| | 6a | Gross rents | 6a | 1,31 | 7,211 | 0 | | | | |
| | b | Less: rental expenses | 6b | 1,94 | 1,872 | 0 | | | | |
| | С | Rental income or (loss) | 6c | (624 | 1,661) | 0 | | | | |
| | d | Net rental income o | r (los | s) | | 🕨 | (624,661) | 0 | 0 | (624,661) |
| | 7a | Gross amount from | | (i) Securit | ies | (ii) Other | | | | |
| | | sales of assets other than inventory | 7a | 6,72 | 2,597 | | | | | |
| ø | h | Less: cost or other basis | 70 | | | | | | | |
| venue | b | and sales expenses . | 7b | 5.61 | 3,022 | 0 | | | | |
| eve | С | | 7c | | 9,575 | | | | | |
| Ĕ. | | | | | | | 1,109,575 | 0 | 0 | 1,109,575 |
| Other R | 8a | Gross income from | | | | | ,, | | | ,,. |
| ð | | events (not including | | 0 | | | | | | |
| | | of contributions rep | | d on line | | | | | | |
| | | 1c). See Part IV, line | e 18 | | 8a | 758,465 | | | | |
| | b | Less: direct expense | es. | | 8b | 445,004 | | | | |
| | с | Net income or (loss) |) from | n fundraisin | g eve | ents 🕨 | 313,461 | | 0 | 313,461 |
| | 9a | Gross income f | from | gaming | | | | | | |
| | | activities. See Part I | IV, lin | e19 . | 9a | 0 | | | | |
| | b | Less: direct expense | es. | | 9b | 0 | | | | |
| | С | Net income or (loss) |) from | n gaming ad | ctivitie | es 🕨 | 0 | 0 | 0 | 0 |
| | 10a | Gross sales of ir | nvente | ory, less | | 7 | | | | |
| | | returns and allowan | | | 10a | 8,838,051 | | | | |
| | | Less: cost of goods | | | 10b | 3,585,126 | | | | |
| | С | Net income or (loss) |) from | n sales of in | vento | | 5,252,925 | 6,148,472 | (895,547) | 0 |
| sn | | | | | | Business Code | | | | |
| ne eo | 11a | ADVERTISING | | | | 541800 | 23,232,856 | 0 | 23,232,856 | 0 |
| scellaneo Revenue | b | OTHER UNRELATED | BUSI | NESS ACTI | /ITY | 900004 | 281,433 | 0 | 281,433 | 0 |
| Miscellaneous Revenue | С | CAFE SALES | | | | 722320 | 341,877 | 0 | 0 | 341,877 |
| ŚЩ | d | All other revenue | | | • | 900009 | 788,992 | 788,992 | 0 | 0 |
| 5 | ~ | Total. Add lines 11a | a-11c | 4 | | 🕨 | 24,645,158 | | | |
| Σ | е 12 | Total revenue. See | | | • | | 291,155,464 | 140,949,200 | 22,618,742 | 18,148,082 |

| | 00 (2019) | | | | Page 10 |
|--------|---|-----------------------|-----------------------------|---------------------------------|-------------------------|
| | IX Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete | ata all columns All | other organizations | must complete colun | an (Λ) |
| Sectio | Check if Schedule O contains a response | | | | |
| Do no | t include amounts reported on lines 6b, 7b, | (A) Total expenses | (B) Program service | (C) | (D) |
| | o, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 12,000 | 12,000 | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | 91,491 | 91,491 | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and | | | | |
| | foreign individuals. See Part IV, lines 15 and 16 | 0 | 0 | | |
| 4 5 | Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees | 7,543,034 | 0 3,143,368 | 3,729,868 | 669,798 |
| 6 | Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 497,914 | 497,914 | 0 | 0 |
| 7 | Other salaries and wages | 37,992,679 | 24,618,895 | 10,709,461 | 2,664,323 |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 3,150,056 | 1,832,778 | 1,065,207 | 252,071 |
| 9 | Other employee benefits | 4,806,782 | 3,084,252 | 1,337,884 | 384,646 |
| 10 | Payroll taxes | 2,749,860 | 1,764,436 | 765,377 | 220,047 |
| 11 | Fees for services (nonemployees): | , -, | , - , | | - / - |
| а | Management | 0 | 0 | 0 | 0 |
| b | Legal | 38,584,656 | 10,033,895 | 28,550,761 | |
| с | Accounting | 270,583 | 0 | 270,583 | |
| d | | 665,200 | 665,200 | 0 | 0 |
| е | Professional fundraising services. See Part IV, line 17 | 5,269,873 | | | 5,269,873 |
| f | Investment management fees | 205,442 | 0 | 205,442 | 0 |
| g | Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) | 2,281,693 | 2,281,693 | 0 | 0 |
| 12 | Advertising and promotion | 26,147,357 | 18,894,976 | 0 | 7,252,381 |
| 13 | Office expenses | 5,054,084 | 3,221,695 | 1,832,389 | 0 |
| 14 | Information technology | 7,100,417 | 3,692,926 | 3,407,491 | 0 |
| 15 | Royalties | 0 | 0 | 0 | 0 |
| 16 | Occupancy | 1,757,002 | 968,459 | 788,543 | 0 |
| 17 | Travel | 7,017,420 | 5,285,695 | 1,731,725 | 0 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | 0 | 0 | 0 |
| 19 | Conferences, conventions, and meetings . | 6,758,731 | 5,031,745 | 1,726,986 | 0 |
| 20 | Interest | 1,689,348 | 904,181 | 785,167 | 0 |
| 21 | Payments to affiliates | 0 | 0 | 0 | 0 |
| 22 | Depreciation, depletion, and amortization . | 3,709,911 | 2,573,868 | 1,136,043 | 0 |
| 23 | Insurance | 2,282,669 | 2,282,669 | 0 | 0 |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| а | ADD'L MEMBER COMMUNICATIONS | 70,373,725 | 44,217,918 | 0 | 26,155,807 |
| b | ADD'L TRAINING AND COMMUNICATIONS | 24,985,588 | 24,985,588 | 0 | 0 |
| С | ADD'L PRINTING AND PUBLICATIONS | 23,378,939 | 23,378,939 | | |
| d | ADD'L ILA LEGISLATIVE PROGRAM EXP | 5,752,450 | 5,752,450 | | |
| е | All other expenses | 13,258,411 | 7,033,910 | 3,651,524 | 2,572,977 |
| 25 | Total functional expenses. Add lines 1 through 24e | 303,387,315 | 196,250,941 | 61,694,451 | 45,441,923 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ □ if following SOP 98-2 (ASC 958-720) | 0 | 0 | 0 | 0 |

Form 990 (2019)

| | | | | | Page 11 |
|---------------|----------|---|--------------------------|-----|----------------------------------|
| Pa | art X | | 4 V | | |
| | | Check if Schedule O contains a response or note to any line in this Pa | (A) Beginning of year | | |
| | 1 | Cash-non-interest-bearing | 0 | 1 | 0 |
| | 2 | Savings and temporary cash investments | 23,937,821 | 2 | 23,935,152 |
| | 3 | Pledges and grants receivable, net | 841,562 | 3 | 932,766 |
| | 4 | Accounts receivable, net | 41,458,041 | 4 | 31,138,285 |
| | 5 | Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | 0 | 5 | 0 |
| | 6 | Loans and other receivables from other disqualified persons (as defined | 0 | | 0 |
| | Ŭ | under section $4958(f)(1)$), and persons described in section $4958(c)(3)(B)$. | 0 | 6 | 0 |
| s | 7 | Notes and loans receivable, net | 6,639,073 | 7 | 8,479,327 |
| Assets | 8 | Inventories for sale or use | 10,632,177 | 8 | 11,716,358 |
| As | 9 | Prepaid expenses and deferred charges | 3,179,694 | 9 | 2,887,414 |
| | 10a | Land, buildings, and equipment: cost or other | 0,110,001 | - | 2,001,111 |
| | h | basis. Complete Part VI of Schedule D10a80,004,902Less: accumulated depreciation10b49,947,784 | 22 700 024 | 10c | 20.057.110 |
| | b 11 | Investments—publicly traded securities | 32,709,031 44,066,394 | 11 | 30,057,118 |
| | 12 | Investments—other securities. See Part IV, line 11 | 871,077 | 12 | <u>52,490,847</u> 543.604 |
| | 12 13 | Investments—program-related. See Part IV, line 11 | 871,077 | 13 | / |
| | 14 | | 0 | 14 | 0 |
| | 15 | Other assets. See Part IV, line 11 | 32,877,210 | | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 33) | 197,212,080 | | <u>36,565,881</u> 198,746,752 |
| | 17 | Accounts payable and accrued expenses | 84,837,717 | 17 | 83,446,471 |
| | 18 | Grants payable | 04,037,717 | 18 | 03,440,471 |
| | 19 | | 46,580,520 | 19 | 47,257,288 |
| | 20 | Tax-exempt bond liabilities | | 20 | 0 |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D. | 0 | 21 | 0 |
| s | 22 | Loans and other payables to any current or former officer, director, | | | |
| Liabilities | ~~ | trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | 0 | 22 | 0 |
| Lia | 23 | Secured mortgages and notes payable to unrelated third parties | 43,138,412 | 22 | 52,320,718 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | 43,130,412 | 24 | 0 |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X | 0 | 24 | 0 |
| | | of Schedule D | 6,623,905 | 25 | 6,068,118 |
| | 26 | Total liabilities. Add lines 17 through 25 | 181,180,554 | 26 | 189,092,595 |
| ces | | Organizations that follow FASB ASC 958, check here ► ✓ and complete lines 27, 28, 32, and 33. | 101,100,004 | | 100,002,000 |
| lan | 27 | Net assets without donor restrictions | (36,276,779) | 27 | (49,641,823) |
| Ba | 28 | Net assets with donor restrictions | 52,308,305 | 28 | 59,295,980 |
| Fund Balances | | Organizations that do not follow FASB ASC 958, check here \blacktriangleright | 02,000,000 | | 00,200,000 |
| ٥٢ | 29 | and complete lines 29 through 33. Capital stock or trust principal, or current funds | | 29 | |
| Net Assets or | 29 30 | Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| SSE | 30 31 | Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| ťΫ | 32 | Total net assets or fund balances | 16,031,526 | 32 | 9,654,157 |
| in l | 33 | Total liabilities and net assets/fund balances | 197,212,080 | 33 | 198,746,752 |

Form **990** (2019)

| Form 99 | 90 (2019) | | | Pa | ge 12 |
|------------|---|----------|-------------|-------|--------------|
| Part | | | | | |
| | 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 | 91,15 | 5,464 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 3 | 03,38 | 7,315 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | · · | | ,851) |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | | | 1,526 |
| 5 | Net unrealized gains (losses) on investments | 5 | | 6,60 | 5,046 |
| 6 | Donated services and use of facilities | 6 | | | 0 |
| 7 | Investment expenses | 7 | | | 0 |
| 8 | Prior period adjustments | 8 | | | 0 |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | | (750 |),564) |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | |
| | 32, column (B)) | 10 | | 9,65 | 4,157 |
| Part | XII Financial Statements and Reporting | | | | _ |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash Accrual Other | | - | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O. | kplain i | n | | |
| 2 a | Were the organization's financial statements compiled or reviewed by an independent accountant? . | | 2a | | ~ |
| | If "Yes," check a box below to indicate whether the financial statements for the year were com | piled o | or | | |
| | reviewed on a separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | ~ | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audit | ed on | a | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Solution Both consolidated and separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over | | | | |
| | the audit, review, or compilation of its financial statements and selection of an independent accounta | | 2c | ~ | |
| | If the organization changed either its oversight process or selection process during the tax year, ex Schedule O. | plain o | n | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set for Single Audit Act and OMB Circular A-133? | th in th | e 3a | | ~ |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not under | · · | | | - |
| D D | required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a | | - 3b | | |
| | | | | 000 | |

Part VII

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

| (A) Name and Title (B) Average hours per week | | | | C) Po | osition | n I | | (D) Reportable | (E) Reportable | (F) Estimated | |
|---|--|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|---|--|
| | per week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MISC) | amount of other compensation from the organization and related organizations | |
| (25) CARRIE LIGHTFOOT | 1.0 | 1 | | | | e | | 4 000 | | | |
| BOARD DIRECTOR | 0.0 | • | | | | | | 1,666 | 0 | 0 | |
| (26) PETE R BROWNELL | 1.0 | 1 | | | | | | 527 | 0 | 0 | |
| BOARD DIRECTOR 05/29/2019 | 1.0 | • | | | | | | 527 | 0 | • | |
| (27) SCOTT L BACH | 1.0 | 1 | | | | | | 236 | 0 | 0 | |
| BOARD DIRECTOR | 1.0 | • | | | | | | 200 | Ŭ | ° | |
| (28) CHARLES L COTTON | 1.0 | 1 | | 1 | | | | 18 | 0 | 0 | |
| 1ST VICE PRESIDENT | 1.0 | | | | | | | | | | |
| (29) LINDA L WALKER | 1.0 | 1 | | | | | | 18 | 0 | 0 | |
| | 0.0 | | | | | | | | | | |
| (30) CAROLYN D MEADOWS | | 1 | | 1 | | | | 0 | 0 | 0 | |
| PRESIDENT (31) WILLES K LEE | 1.0 | | | | | | | | | | |
| 2ND VICE PRESIDENT | 0.0 | 1 | | ~ | | | | 0 | 0 | 0 | |
| (32) ALLAN D CORS | 1.0 | | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 0 | 0 | 0 | |
| (33) ALLEN B WEST | 1.0 | 1 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 0 | 0 | 0 | |
| (34) ANTHONY P COLANDRO | 1.0 | 1 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | • | | | | | | 0 | 0 | 0 | |
| (35) BILL MILLER | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | • | | | | | | 0 | 0 | 0 | |
| (36) BLAINE WADE | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | • | | | | | | | | • | |
| (37) BOB BARR | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | - | | |
| (38) CARL T ROWAN, JR | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| | 0.0 | | | | | | | | | | |
| (39) CAROL FRAMPTON | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR (40) CLEL BAUDLER | 1.0 | | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | 1 | | | | | | 0 | 0 | 0 | |
| (41) CRAIG MORGAN | 1.0 | | | | | | | | | | |
| BOARD DIRECTOR 8/19/2019 | 0.0 | ~ | | | | | | 0 | 0 | 0 | |
| (42) CURTIS S JENKINS | 1.0 | | | | | | | | | | |
| BOARD DIRECTOR | 1.0 | ~ | | | | | | 0 | 0 | 0 | |
| (43) DAN BOREN | 1.0 | 1 | | | | | | | | | |
| BOARD DIRECTOR 11/1/2019 | 0.0 | ~ | | | | | | 0 | 0 | 0 | |
| (44) DAVID G COY | 1.0 | 1 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | • | | | | | | 0 | 0 | 0 | |

| (A) Name and Title | (B) Average hours | | ((Che | C) Po | sitior | n (vla | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other | |
|----------------------------|--|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|--|--|
| | (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | compensation from the organization and related organizations | |
| (45) DEAN CAIN | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (46) DON SABA | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (47) DONALD E YOUNG | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (48) DR. JOHN THODOS | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR 10/4/2019 | 0.0 | | | | | | | | | | |
| (49) DUANE LIPTAK, JR | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (50) DWIGHT D VAN HORN | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 1.0 | | | | | | | | | | |
| (51) EDIE P FLEEMAN | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (52) ESTHER SCHNEIDER | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR 8/1/2019 | 0.0 | | | | | | | | | | |
| (53) GRAHAM HILL | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 1.0 | | | | | | | | - | | |
| (54) HEIDI E WASHINGTON | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (55) HERBERT A LANFORD, JR | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (56) HOWARD J WALTER | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (57) IL LING NEW | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (58) J. KENNETH BLACKWELL | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (59) JAMES W PORTER II | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 2.0 | | | | | | | | | | |
| (60) JAY PRINTZ | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (61) JOE M ALLBAUGH | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | | | | |
| (62) JOEL FRIEDMAN | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 1.0 | | | | | | | | | | |
| (63) JOHN C SIGLER | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 1.0 | | | | | | | | | | |
| (64) JOHN L CUSHMAN | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR 4/27/2019 | 0.0 | | | | | | | | Ű | | |
| (65) JOHNNY NUGENT | 1.0 | 1 | | | | | | 0 | 0 | 0 | |
| BOARD DIRECTOR | 0.0 | | | | | | | , in the second s | Ľ Ú | Ľ | |

| (A) Name and Title | (B) Average hours | | ((Che | C) Po | sitior | n (vla | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other |
|--|--|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|--|
| | per week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (66) KARL A MALONE | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | | | | | | | | - | |
| (67) KEVIN HOGAN | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | | | | | | | | | |
| (68) KIM RHODE | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | | | | | | | | | |
| (69) KRISTY TITUS | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | | | | | | | | | |
| (70) LARRY E CRAIG | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | | | | | | | | | |
| (71) LEROY SISCO | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | | | | | | | | | |
| (72) MARIA HEIL | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | | | | | | | | | |
| (73) MARK E VAUGHAN | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | | | | | | | | | |
| (74) MARK GEIST | | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR (75) MARK ROBINSON | 0.0 | | | | | | | | | |
| | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| | 0.0 | | | | | | | | | |
| (76) MATT BLUNT | | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR (77) MELANIE PEPPER | 0.0 | | | | | | | | | |
| | | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR (78) PATRICIA A CLARK | 0.0 | | | | | | | | | |
| <u> </u> | | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR (79) PAUL D BABAZ | 0.0 | | | | | | | | | |
| | | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR (80) RICHARD R CHILDRESS | 0.0 | | | | | | | | | |
| BOARD DIRECTOR 8/19/2019 | 1.0 | ~ | | | | | | 0 | 0 | 0 |
| (81) RICK S FIGUEROA | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 0 | 0 | 0 |
| (82) ROBERT A NOSLER | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 2.0 | ~ | | | | | | 0 | 0 | 0 |
| (83) ROBERT E MANSELL | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 0 | 0 | 0 |
| (84) ROBERT K BROWN | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 1.0 | ~ | | | | | | 0 | 0 | 0 |
| (85) RONALD L SCHMEITS | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 1.0 | ~ | | | | | | 0 | 0 | 0 |
| (86) RONNIE G BARRETT | 1.0 | | | | | | | | | |
| BOARD DIRECTOR | 0.0 | ~ | | | | | | 0 | 0 | 0 |

| (A) Name and Title | (B) Average hours per week | | (Ch | eck all | ositior | ר ply) | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other |
|----------------------------|--|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|--|
| | (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (87) SANDRA S FROMAN | 5.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | • | | | | | | 0 | 0 | 0 |
| (88) SEAN MALONEY | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR 8/1/2019 | 0.0 | • | | | | | | 0 | 0 | 0 |
| (89) STEVEN C SCHREINER | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | • | | | | | | 0 | 0 | 0 |
| (90) SUSAN HOWARD | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 1.0 | | | | | | | • | 0 | Ŭ |
| (91) TED W CARTER | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | • | | | | | | 0 | 0 | 0 |
| (92) THOMAS P ARVAS | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 1.0 | • | | | | | | 0 | 0 | 0 |
| (93) TIMOTHY KNIGHT | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR 8/1/2019 | 0.0 | • | | | | | | 0 | 0 | 0 |
| (94) TODD J RATHNER | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | • | | | | | | | • | , |
| (95) TOM KING | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 2.0 | • | | | | | | | • | Ŭ |
| (96) WAYNE ANTHONY ROSS | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 0.0 | • | | | | | | 0 | 0 | Ŭ |
| (97) WILLIAM A BACHENBERG | 1.0 | ~ | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 1.0 | • | | | | | | U | 0 | Ŭ |
| (98) WILLIAM H SATTERFIELD | 1.0 | 1 | | | | | | 0 | 0 | 0 |
| BOARD DIRECTOR | 2.0 | • | | | | | | 0 | 0 | 0 |

Open to Public Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Inspection If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. · Section 527 organizations: Complete Part I-A only. If the organization answered "Yes," on Form 990. Part IV. line 4, or Form 990-EZ. Part VI. line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for 1 definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) \$ 2,971,894 3 Volunteer hours for political campaign activities (see instructions) 5.348 Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 \$ 1 \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No 4a Yes No If "Yes," describe in Part IV. b Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 1 0 2 Enter the amount of the filing organization's funds contributed to other organizations for section 0 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 0 V Yes 4 Did the filing organization file **Form 1120-POL** for this year? No 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (c) EIN (a) Name (b) Address (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-.

| (1) (SEE STATEMENT) | | |
|---------------------|--|--|
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |

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

NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130

Cat. No. 50084S



(Form 990 or 990-EZ)

SCHEDULE C

Political Campaign and Lobbying Activities

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

Schedule C (Form 990 or 990-EZ) 2019

| Pa | nrt II | -A | Complete if the organization section 501(h)). | is exempt under section 501(c)(3) and filed | d Form 5768 (elec | ction under |
|----|--------|----------|---|---|-----------------------|----------------|
| A | Che | ck 🕨 | | s to an affiliated group (and list in Part IV each affi | liated group membe | er's name, |
| | | | address, EIN, expenses, and s | hare of excess lobbying expenditures). | | |
| В | Che | ck 🕨 | if the filing organization checke | ed box A and "limited control" provisions apply. | | |
| | | | - | ring Expenditures | (a) Filing | (b) Affiliated |
| | | | (The term "expenditures" me | ans amounts paid or incurred.) | organization's totals | group totals |
| - | a | Fotal lo | bbying expenditures to influence p | oublic opinion (grassroots lobbying) | | |
| | b T | Fotal lo | bbying expenditures to influence a | a legislative body (direct lobbying) | | |
| | c ¯ | Fotal lo | bbying expenditures (add lines 1a | and 1b) | | |
| | d (| Other e | exempt purpose expenditures | | | |
| | е | Fotal e | xempt purpose expenditures (add | lines 1c and 1d) | | |
| | f l | _obbyi | ng nontaxable amount. Enter tl | ne amount from the following table in both | | |
| | | columr | าร. | | | |
| | ŀ | f the ar | nount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | |
| | Ν | lot ove | r \$500,000 | 20% of the amount on line 1e. | | |
| | C | Over \$5 | 00,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | |
| | C | Over \$1 | ,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | |
| | C | Over \$1 | ,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | |
| | C | Over \$1 | 7,000,000 | \$1,000,000. | | |
| | g (| Grassr | oots nontaxable amount (enter 259 | % of line 1f) | | |
| | h S | Subtra | ct line 1g from line 1a. If zero or les | ss, enter -0 | | |
| | i S | Subtra | ct line 1f from line 1c. If zero or les | s, enter -0 | | |
| | j I | f there | e is an amount other than zero o | on either line 1h or line 1i, did the organization | file Form 4720 | |
| | | | ng section 4911 tax for this year? | | | Yes No |

4-Year Averaging Period Under Section 501(h)

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

| | Lobbying Expenditures During 4-Year Averaging Period | | | | | | | | | | | | |
|----|--|-----------------|-----------------|-----------------|------------------|------------------|--|--|--|--|--|--|--|
| | Calendar year (or fiscal year beginning in) | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) Total | | | | | | | |
| 2a | Lobbying nontaxable amount | | | | | | | | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | | | | | | | | |
| с | Total lobbying expenditures | | | | | | | | | | | | |
| d | Grassroots nontaxable amount | | | | | | | | | | | | |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | | | | | | | | |
| f | Grassroots lobbying expenditures | | | | | | | | | | | | |

Schedule C (Form 990 or 990-EZ) 2019

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

| | (election under section 501(h)). | | | | (1.) | |
|---------|---|------------------|---------|-----------|--------|-------|
| | each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed | (a | | | (b) | |
| aescr | iption of the lobbying activity. | Yes | No | Α | mount | Ľ |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? | | | | | |
| a L | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | | |
| b | | ┝───┤ | | | | |
| с С | Media advertisements? | ┝───┤ | | | | |
| d | | | | | | |
| e | Publications, or published or broadcast statements? | | | | | |
| f | Grants to other organizations for lobbying purposes? | | | | | |
| g b | Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | | |
| h i | Other activities? | | | | | |
| | Other activities? | | | | | |
| j 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | | | |
| c | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | - | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | | |
| Part | |)(5) c | or sec | ction | | |
| | 501(c)(6). | ,, - ,, - | | | | |
| | | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | | 1 | ~ | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | 2 | | ~ |
| 3 | Did the organization agree to carry over lobbying and political campaign activity expenditures from the | prior y | year? | 3 | | ~ |
| Part | III-B Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OI answered "Yes." | | | | ine 3 | 8, is |
| 1 | Dues, assessments and similar amounts from members | | 1 | | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). | of | | | | |
| а | Current year | . [| 2a | | | |
| b | Carryover from last year | . [| 2b | | | |
| С | Total | . [| 2c | | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . | . [| 3 | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby | | | | | |
| | and political expenditure next year? | | 4 | | | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | • | 5 | | | |
| Part | | | | | | |
| 2 (see | te the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information. | up list | :); Par | t II-A, I | ines 1 | and |
| SEE N | NEXT PAGE | | | | | |

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

| Return Reference - Identifier | Explanation |
|--|--|
| SCHEDULE C, PART I-A, LINE 1 - DESCRIPTION OF POLITICAL ACTIVITIES | SUPPORT FOR FUNDRAISING AND ADMINISTRATIVE EXPENSES OF A SEPARATE SEGREGATED FUND IS INDUSTRY STANDARD FOR NONPROFIT ORGANIZATIONS LIKE THE NRA, AS ALLOWED BY LAW. IN 2019, THE NRA PAID \$2,971,894 FUNDRAISING AND ADMINISTRATIVE EXPENSES FOR THE SEPARATE SEGREGATED FUND, NRA POLITICAL VICTORY FUND, AS ALLOWED BY LAW. THE NRA ENGAGED IN ACTIVITIES IN SUPPORT OF ITS MISSION, WHICH INCLUDES PROTECTING AND DEFENDING THE CONSTITUTION OF THE UNITED STATES, ESPECIALLY WITH REFERENCE TO THE INALIENABLE RIGHT OF INDIVIDUAL AMERICAN CITIZEN GUARANTEED BY SUCH CONSTITUTION TO ACQUIRE, POSSESS, COLLECT, EXHIBIT, TRANSPORT, CARRY, TRANSFER OWNERSHIP OF, AND ENJOY THE RIGHT TO USE ARMS, IN ORDER THAT THE PEOPLE MAY ALWAYS BE IN A POSITION TO EXERCISE THEIR LEGITIMATE INDIVIDUAL RIGHTS OF SELF PRESERVATION AND DEFENSE OF FAMILY, PERSON, AND PROPERTY. IN PURSUIT OF THESE GOALS OF THE ASSOCIATION, THE NRA SPENT FUNDS DIRECTLY AND INDIRECTLY ON POLITICAL ACTIVITIES, WHICH WERE NOT THE PRIMARY ACTIVITIES OF THE ORGANIZATION. THE NRA IS ORGANIZED PRIMARILY TO PROMOTE SOCIAL WELFARE AND CAN ALSO ENGAGE IN POLITICAL ACTIVITIES ON BEHALF OF OR IN OPPOSITION TO CANDIDATES FOR POLITICAL OFFICE, AS ALLOWED BY LAW. BY ANY MEASURE, THE PERCENTAGE OF FUNDS SPENT BY THE NRA ON POLITICAL ACTIVITIES IN MODEST IN COMPARISON TO THE BUDGET DEVOTED TO THE PRIMARY ACTIVITIES OF THE NRA. FOR INSTANCE, ALL EXPENDITURES NOTED ON PART I- A AND I-C OF SCHEDULE C AMOUNTED TO ABOUT 1% OF THE NRA'S TOTAL EXPENSES IN 2019, AS APPLIED TO TOTAL EXPENSES REPORTED ON FORM 990, PART IX, LINE 25. REPORTERS AND OTHER READERS ARE ALSO KINDLY REMINDED THAT THE SEPARATE SEGREGATED FUND IS A SEPARATE ENTITY FOR TAX PURPOSES. |
| SCHEDULE C, PART I-C, LINE 4 - FORM 1120-POL | THIS INFORMATION NOTE REGARDS THE NRA'S TAXES. THE NRA SEPARATELY FILES FORM 1120-POL, WHICH IS NOT SUBJECT TO PUBLIC DISCLOSURE. THE FOLLOWING INFORMATION ABOUT TAXES PAID WITH THE NRA'S FORMS 1120-POL IS SHARED HERE ON A VOLUNTARY BASIS AS A SERVICE TO READERS AND TO DEMONSTRATE IN GOOD FAITH THAT THE ORGANIZATION IS A TAXPAYER IN GOOD STANDING. 527(F) PROXY TAX IS PAID ON THE LESSER OF NET INVESTMENT INCOME OR CERTAIN POLITICAL EXPENDITURES AS DEFINED BY THE FEDERAL TAX CODE, SUCH AS WHEN CERTAIN POLITICAL COMMUNICATIONS EXPRESSLY ADVOCATE THE ELECTION OR DEFEAT OF A CANDIDATE AND ARE MADE BY THE NRA ITSELF RATHER THAN BY THE NRA'S SEPARATE SEGREGATED FUND. THE AMOUNT OF 527 (F) PROXY TAX PAID WITH THE NRA'S 2019 FORM 1120-POL WAS ZERO. HISTORICALLY, 527(F) PROXY TAX WAS REQUIRED TO BE PAID FOR 2018 WAS \$164,944; NO 527(F) PROXY TAX WAS REQUIRED TO BE PAID FOR 2017; THE AMOUNT OF 527(F) PROXY TAX PAID WITH THE NRA'S 2016 FORM 1120-POL WAS \$20,835; THE AMOUNT PAID WITH THE NRA'S 2015 FORM 1120-POL WAS \$21,817. AS ANOTHER POLITE REMINDER TO REPORTERS AND OTHER READERS, FORM 990 INFORMATION IS NOT NECESSARILY EXPECTED TO TIE TO FEDERAL ELECTION COMMISSION (FEC) REPORTING DUE TO DIFFERENT DEFINITIONS AND EXCLUSIONS IN THE DIFFERENT REGULATORY REGIMES. |
| SCHEDULE C, PART I-C, LINE 5 - POLITICAL ACTION COMMITTEE | THE NRA POLITICAL VICTORY FUND, AN INDEPENDENT POLITICAL ACTION COMMITTEE (PAC) OF THE NRA, DIRECTLY RECEIVED CONTRIBUTIONS DURING 2019 OF \$10,713,253. |

Line 5. Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. (continued)

| (a) | (b) | (c) | (d) | (e) |
|---|--|------------|---|--|
| Name | Address | EIN | Amount paid from filing organization's funds. If none, enter -0 | Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0 |
| REPUBLICAN ATTORNEYS GENERAL ASSOCIATION | 1747 PENNSYLVANIA AVE, NW STE 800 WASHINGTON, DC 20006 | 46-4501717 | 90,000 | 0 |
| REPUBLICAN GOVERNORS ASSOCIATION | 1747 PENNSYLVANIA AVE, NW STE 250 WASHINGTON, DC 20006 | 11-3655877 | 145,000 | 0 |
| NRA POLITICAL VICTORY FUND (SEE PARTS I-A AND IV) | 11250 WAPLES MILL RD FAIRFAX, VA 22030 | 52-1083020 | 0 | 3,952 |

| SCHEDULE D |) |
|------------|---|
| (Form 990) | |

Supplemental Financial Statements

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

2019 Open to Public Inspection

OMB No. 1545-0047

| Internal Revenue Service | |
|--------------------------|--|
| Name of the organization | |

Department of the Treasury

| Emp | loyer | ident | ific | ati | on | nı |
|-----|-------|-------|------|-----|----|----|
| | | | | - | | |

| vame o | r the organization | | | Employer identification number |
|--------|--|------------------------------|------------------|--|
| NATIC | NAL RIFLE ASSOCIATION OF AMERICA | | | 53-0116130 |
| Par | t I Organizations Maintaining Donor Advi | sed Funds or Other S | imilar Funds | or Accounts. |
| | Complete if the organization answered " | Yes" on Form 990, Par | t IV, line 6. | |
| | · · | (a) Donor advised fi | unds | (b) Funds and other accounts |
| 1 | Total number at end of year | | | |
| 2 | Aggregate value of contributions to (during year) . | | | |
| 3 | Aggregate value of grants from (during year) | | | |
| 4 | Aggregate value at end of year | | | |
| | | | | lin dawar adda d |
| 5 | Did the organization inform all donors and donor a | | | |
| • | funds are the organization's property, subject to the | - | - | |
| 6 | Did the organization inform all grantees, donors, an only for charitable purposes and not for the benefit | | | |
| | | | | |
| | | | | · · · · · · · · Yes 🗌 No |
| Par | | / " E 000 D | | |
| | Complete if the organization answered " | | | |
| 1 | Purpose(s) of conservation easements held by the o | • | | |
| | Preservation of land for public use (for example, recrea | ation or education) 🗌 Pi | reservation of a | a historically important land area |
| | Protection of natural habitat | | reservation of a | a certified historic structure |
| | Preservation of open space | | | |
| 2 | Complete lines 2a through 2d if the organization hel | d a qualified conservatior | n contribution i | n the form of a conservation |
| | easement on the last day of the tax year. | | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | | . 2a |
| b | Total acreage restricted by conservation easements | | | . 2b |
| с | Number of conservation easements on a certified hi | | | |
| d | Number of conservation easements included in (| | · · / | |
| | - | | | · 2d |
| 3 | Number of conservation easements modified, trans | | | |
| U | tax year ► | ionou, roiouoou, oximgu | | lated by the erganization damig the |
| 4 | Number of states where property subject to conserv | vation easement is locate | ed 🕨 | |
| 5 | Does the organization have a written policy reg | | | ction, handling of |
| • | violations, and enforcement of the conservation eas | | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspec | | | |
| • | | ing, nariaing of violations, | and enterening e | |
| 7 | Amount of expenses incurred in monitoring, inspecting | n handling of violations a | nd enforcing co | pservation easements during the year |
| • | ► \$ | g, nanaling of violations, a | | inservation casements during the year |
| 0 | * |)(d) above esticity the read | uiromonto of oo | ation $170(h)(4)(D)(i)$ |
| 8 | Does each conservation easement reported on line 2 and section $170(h)(4)(B)(ii)?$ | | | |
| • | | · · · · · · · · · · | | |
| 9 | In Part XIII, describe how the organization reports of | | | |
| | balance sheet, and include, if applicable, the text of organization's accounting for conservation easemer | | lization s linan | cial statements that describes the |
| Devi | | | | they Circiley Accete |
| Part | | - | | ther Similar Assets. |
| | Complete if the organization answered " | | | |
| 1a | If the organization elected, as permitted under FAS | | | |
| | of art, historical treasures, or other similar assets | | | |
| | service, provide in Part XIII the text of the footnote t | o its financial statements | that describes | s these items. |
| b | If the organization elected, as permitted under FAS | | | |
| | art, historical treasures, or other similar assets held | • | cation, or rese | arch in furtherance of public service, |
| | provide the following amounts relating to these item | | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | | ► \$ |
| | (i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X | | | ► \$ |
| 2 | If the organization received or held works of art, | historical treasures, or c | other similar as | ssets for financial gain, provide the |
| | following amounts required to be reported under FA | | | <u> </u> |
| а | Revenue included on Form 990, Part VIII, line 1 | | | ► \$ |
| b | Assets included in Form 990 Part X | | | ► \$ |

| Schedu | e D (Form 990) 2019 | | | | | Page 2 |
|--------|--|------------------------------|----------------------|---------------------|-----------------------------|----------------------|
| Part | Organizations Maintaining | Collections of / | Art, Historical 1 | reasures, or O | ther Similar Ass | ets (continued) |
| 3 | Using the organization's acquisition, a collection items (check all that apply): | | her records, chec | k any of the follo | wing that make sig | gnificant use of its |
| а | Public exhibition | | d 🗹 Loan | or exchange prog | ram | |
| b | Scholarly research | | e 🗌 Other | | | |
| С | Preservation for future generations | | | | | |
| 4 | Provide a description of the organizat XIII. | ion's collections a | and explain how t | hey further the or | ganization's exem | pt purpose in Part |
| 5 | During the year, did the organization assets to be sold to raise funds rather | | | | | ✓ Yes 🗌 No |
| Part | IV Escrow and Custodial Arra | ingements. | | | | |
| | Complete if the organization 990, Part X, line 21. | answered "Yes' | ' on Form 990, I | Part IV, line 9, or | reported an amo | ount on Form |
| 1a | Is the organization an agent, trustee, included on Form 990, Part X? | | | | | 🗌 Yes 🗌 No |
| b | If "Yes," explain the arrangement in Pa | art XIII and comple | ete the following ta | able: | | |
| | | | | | Arr | nount |
| С | 5 5 | | | | | |
| d | | | | | d | |
| е | Distributions during the year | | | | | |
| f | Ending balance | | | | | |
| 2a | Did the organization include an amour | | | | | |
| b | If "Yes," explain the arrangement in Pa | art XIII. Check here | e if the explanatio | n has been provid | ed on Part XIII . | 📋 |
| Par | | | . – | | | |
| | Complete if the organization | | | | | |
| _ | | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
| 1a | Beginning of year balance | 20,293,364 | 20,566,237 | 19,520,483 | | 16,738,628 |
| b | Contributions | 1,152,173 | 1,603,940 | 1,371,910 | 1,482,504 | 1,988,178 |
| С | Net investment earnings, gains, and losses | 2,118,475 | (886,512) | 625,818 | 1,204,551 | (266,970) |
| d | Grants or scholarships | 0 | 0 | | | |
| е | Other expenditures for facilities and | | | | | |
| | programs | 0 | 940,564 | 916,400 | 786,344 | 772,538 |
| f | Administrative expenses | 51,474 | 49,737 | 35,574 | 37,728 | 29,798 |
| g | End of year balance | 23,512,538 | 20,293,364 | 20,566,237 | | 17,657,500 |
| 2 | Provide the estimated percentage of t | | d balance (line 1g | , column (a)) held | as: | |
| а | Board designated or quasi-endowmer | | % | | | |
| b | Permanent endowment 100. | 00 % | | | | |
| С | Term endowment ► 0.00 % | | | | | |
| | The percentages on lines 2a, 2b, and | 2c should equal 10 | 00%. | | | |
| 3a | Are there endowment funds not in the | e possession of th | e organization the | at are held and ad | dministered for the | |
| | organization by: | | | | | Yes No |
| | (i) Unrelated organizations | | | | | 3a(i) 🖌 |
| | () | | | | | 3a(ii) 🖌 |
| b | If "Yes" on line 3a(ii), are the related of | • | • | | | 3b 🖌 |
| 4 | Describe in Part XIII the intended uses | v | n's endowment f | unds. | | |
| Part | | | | | | |
| | Complete if the organization | answered "Yes' | | | See Form 990, I | Part X, line 10. |
| | Description of property | (a) Cost or oth (investme | | | Accumulated lepreciation | (d) Book value |
| 1a | Land | | 0 | 5,380,792 | | 5,380,792 |
| b | Buildings | | | 55,907,362 | 34,155,156 | 21,752,206 |
| С | Leasehold improvements | | | | | |
| d | Equipment | | | 18,716,748 | 15,792,628 | 2,924,120 |
| e | Other | | | | | |
| Total. | Add lines 1a through 1e. (Column (d) n | nust equal Form 99 | 90, Part X, columr | n (B), line 10c.) . | | 30,057,118 |

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 Investments-Other Securities. Part VII Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives . . . (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Investments-Program Related. Part VIII Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. Part IX Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) OTHER 3,970,243 (2) DUE FROM NRA FOUNDATION 32,252,080 (3) DUE FROM NRA CIVIL RIGHTS DEFFENSE FUND 1,374 (4) DUE FROM NRA SPECIAL CONTRIBUTION FUND 342,184 (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► 36,565,881 . Other Liabilities. Part X Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes NOTE PAYABLE - NRA FOUNDATION 5,000,000 (2) CAPITAL LEASE ARRANGEMENT 918,898 (3) 149,220 ACCRUED SALES AND USE TAXES (4) **COUPON LIABILITY** 0 (5) DERIVATIVE INSTRUMENT MARKET VALUATION 0 (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) . 🕨 6,068,118 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. ~

| Schedul | le D (Form 990) 2019 | | | | Page 4 |
|---------|---|----------|-------------------------|-----------|----------------------|
| Part | | | | Return | • |
| | Complete if the organization answered "Yes" on Form 990, | | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | • • | | 1 | 306,852,309 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | |
| a | Net unrealized gains (losses) on investments | 2a | 6,605,046 | | |
| b | Donated services and use of facilities | 2b | 0 | | |
| C | Recoveries of prior year grants | | 0 | | |
| d | Other (Describe in Part XIII.) | 2d | 3,656,292 | 0.0 | 10.061.000 |
| e | Add lines 2a through 2d | | | 2e 3 | 10,261,338 |
| 3 | Subtract line 2e from line 1 | · · · | | 3 | 296,590,971 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 10 | | | |
| a b | Investment expenses not included on Form 990, Part VIII, line 7b . Other (Describe in Part XIII.) . . | 4a 4b | (5,435,507) | | |
| C C | Add lines 4a and 4b | | () | 4c | (5,435,507) |
| 5 | Total revenue. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line</i> | | | 4C 5 | 291,155,464 |
| Part | | | | - | |
| raii | Complete if the organization answered "Yes" on Form 990, | | | netu | |
| 1 | | | v, iiie iza. | 1 | 308,822,822 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | • • | | • | 500,022,022 |
| ∠ a | Donated services and use of facilities | 2a | 0 | | |
| a b | Prior year adjustments | | 0 | | |
| C C | Other losses | | 0 | | |
| d | Other (Describe in Part XIII.) | | 5,526,998 | | |
| e | Add lines 2a through 2d | | | 2e | 5,526,998 |
| 3 | Subtract line 2e from line 1 | | | 3 | 303,295,824 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | · · · | | Ū | 000,200,021 |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII.) | - | 91,491 | | |
| c | Add lines 4a and 4b | | | 4c | 91,491 |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin | | | 5 | 303,387,315 |
| Part | | / | | | |
| | e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an | d 4; Pa | art IV, lines 1b and 2b | ; Part V, | line 4; Part X, line |
| 2; Parl | t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part | to pro | vide any additional in | formatic | on. |
| SEE S | TATEMENT | | | | |
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Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Return Reference - Identifier | Explanation | |
|---|---|-------------|
| SCHEDULE D, PART XI, LINE | (a) Description | (b) Amount |
| 2(D) - OTHER REVENUES IN AUDITED FINANCIAL | OTHER- AGENCY TRANSACTIONS | 3,534,160 |
| STATEMENTS NOT IN FORM 990 | OTHER-UNREALIZED GAIN (LOSS) ON DERIVATIVE INSTRUMENT | 122,132 |
| SCHEDULE D, PART XI, LINE | (a) Description | (b) Amount |
| 4(B) - OTHER REVENUE | GRANTS PAID | 91,491 |
| | RENT EXPENSE | - 1,941,872 |
| | COST OF GOOD SOLD-MEMBERSHIP | - 3,585,126 |
| SCHEDULE D, PART XII, LINE | (a) Description | (b) Amount |
| 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL | RENTAL EXPENSE | 1,941,872 |
| STATEMENTS NOT IN FORM 990 | COST OF GOODS SOLD-MEMBERSHIP | 3,585,126 |
| SCHEDULE D, PART XII, LINE 4(B) - OTHER EXPENSES | (a) Description | (b) Amount |
| | INTEREST ON ENDOWMENTS - GRANTS | 91,491 |

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

| Return Reference - Identifier | Explanation |
|---|---|
| SCHEDULE D, PART III, LINE 4 - COLLECTIONS OF ART - DESCRIPTION OF COLLECTIONS | THIS RESPONSE DESCRIBES THE MUSEUM COLLECTIONS WHICH ARE HELD BY THE NRA'S RELATED ORGANIZATIONS AND CURATED BY NRA EMPLOYEES. THE NRA MUSEUMS PROMOTE GUN COLLECTING AND PRESERVATION OF HISTORY THOUGH FIREARMS. THE NRA MUSEUMS INCLUDE THE NATIONAL FIREARMS MUSEUM IN FAIRFAX, VIRGINIA: THE FRANK BROWNELL MUSEUM OF THE SOUTHWEST IN RATON, NEW MEXICO; AND THE NRA NATIONAL SPORTING ARMS MUSEUM AT BASS PRO SHOPS IN SPRINGFIELD, MISSOURI. TO MAKE THE NRA MUSEUMS THE FINEST POSSIBLE RESOURCE FOR THE PUBLIC, THE NRA AND ITS AFFILIATED CHARITIES RELY ON GENEROUS SUPPORTERS TO BUILD THE EXHIBITION AND RESEARCH COLLECTIONS THROUGH COLLECTIONS OF HISTORICALLY SIGNIFICANT FOREARMS. PLEASE VISIT NRAMUSEUMS.ORG FOR CURRENT INFORMATION ON THE MUSEUM GALLERIES. |
| SCHEDULE D, PART III, LINE 5 - DONATIONS | THIS RESPONSE EXPLAINS WHY THE NRA MAY SOLICIT OR RECEIVE ASSETS THAT SOME DONORS INTEND TO BE SOLD RATHER THAN MAINTAINED PERMANENTLY. WHEN DONORS INTEND THEIR GIFTS OF FIREARMS TO BE SOLD RATHER THEN HELD FOR EXHIBITION OR RESEARCH IN THE COLLECTIONS OF THE NRA MUSEUM, THE NRA PARTNERS WITH AUCTION HOUSES. DONORS MAY CHOOSE TO HAVE GUNS SOLD FOR VARIOUS REASONS, SUCH AS TO SUPPORT CURRENT PROGRAM SERVICES OR TO FUND A CHARITABLE GIFT ANNUITY OR CHARITABLE TRUST WITH ONE OF THE NRA'S AFFILIATED CHARITIES. THE PHILANTHROPIC INTENT OF EACH DONOR DETERMINES HOW A GIFT IS HANDLED. |
| SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS | THIS RESPONSE DESCRIBES THE INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS. THE ENDOWMENT FUNDS BENEFIT A DIVERSE RANGE OF PHILANTHROPIC INTERESTS, INCLUDING TRAINING IN MARKSMANSHIP, NATIONAL SHOOTING CHAMPIONSHIPS, WOMEN'S LEADERSHIP, HUNTERS'LEADERSHIP, RECREATIONAL SHOOTING, LAW ENFORCEMENT, NRA MUSEUMS, AND THE NATIONAL ENDOWMENT FOR THE PROTECTION OF THE SECOND AMENDMENT. |
| SCHEDULE D, PART X, LINE 1 - OTHER LIABILITIES-TAXES | THIS INFORMATIONAL NOTE REGARDS THE NRA'S TAXES. THE NRA IS A SUBSTANTIAL TAXPAYER AND REMAINS IN GOOD STANDING WITH THE TAX AUTHORITIES. STATE AND LOCAL TAXES PAID BY THE NRA INCLUDE SALES AND USE TAXES, REAL ESTATE AND PERSONAL PROPERTY TAXES, AMUSEMENT TAXES, AND STATE UNEMPLOYMENT TAXES. THE LIABILITY SHOWN ON SCHEDULE D, PART X FOR ACCRUED SALES AND USE TAXES RELATES TO TIMING AND IS A SMALL FRACTION OF TAXES PAID DURING THE YEAR. ADDITIONAL NOTES REGARDING THE NRA'S TAXES ARE SHARED ON SCHEDULE C REGARDING 527(F) PROXY TAXES AND ON SCHEDULE O REGRADING UNRELATED BUSINESS INCOME TAXES. THE NRA CHOOSES TO SHARE THIS ADDITIONAL INFORMATION ABOUT THE NRA'S TOTAL TAXES TO DEMONSTRATE IN GOOD FAITH THAT THE ORGANIZATION IS A TAXPAYER IN GOOD STANDING. |
| SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE | THIS RESPONSE PROVIDES THE TEXT OF THE FOOTNOTE TO THE ORGANIZATION'S FINANCIAL STATEMENTS IN ACCORDANCE WITH FASB ASC 740 THE NRA IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE AND FROM STATE INCOME TAXES. THE NRA ACTIVITIES THAT CAUSE IMPOSITION OF THE UNRELATED BUSINESS INCOME TAX PROVISION OF THE CODE RESULT IN NO SIGNIFICANT TAX LIABILITY. THE NRA FOLLOWS THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE NRA MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT EVALUATED THE NRA'S TAX POSITIONS AND CONCLUDED THAT THE NRA HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. TAX YEARS FROM 2016 THROUGH THE CURRENT YEAR REMAIN OPEN FOR EXAMINATION BY TAX AUTHORITIES. |

| SCHEDULE F (Form 990) | | State | ement of | f Activitie | es Outside the Uni | ited States | ; - | OMB No. 1545-0047 |
|--------------------------|------------------------------------|-------------------------------|--|---|--|--|----------------------|---|
| (For | n 990) | ► Complet | te if the organ | ization answer | ed "Yes" on Form 990, Part I | V, line 14b, 15, or | 16. | 2019 |
| Depart | ment of the Treasury | | | | Open to Public | | | |
| | Revenue Service | | io to www.irs | .gov/Form9901 | or instructions and the lates | t information. | | Inspection |
| | of the organization ONAL RIFLE ASS | | | | | | | identification number 53-0116130 |
| Par | | | | ies Outside | the United States. Con | plete if the orga | | |
| | | , Part IV, line | | | | .p.e.ee e.ge | | |
| 1 | other assistan award the grar | ce, the grantents or assistan | ees' eligibility ce? | / for the gran | cords to substantiate the a ts or assistance, and the | selection criteria | used to | ☐ Yes ☐ No |
| | outside the Un | | | 9 | | | g | |
| 3 | Activities per F | Region. (The fo | llowing Part | I, line 3 table o | can be duplicated if addition | nal space is need | led.) | |
| | (a) Regior | | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | (e) If activity liste a program se describe specifi service(s) in the | ervice, c type of | (f) Total expenditures for and investments in the region |
| (1) | CENTRAL AMER CARIBBEAN | | 0 | 0 | INVESTMENTS | | | 3,352,620 |
| (0) | EAST ASIA AND | THE PACIFIC | 0 | 0 | PROGRAM SERVICES | PUBLICATIONS | | 600 |
| (2) | EUROPE (INCLU | | 0 | • | FUNDRAISING | | | 000 |
| (3) | ICELAND AND G | | 0 | 0 | | | | 4,800 |
| (4) | EUROPE (INCLU ICELAND AND G | REENLAND) | 0 | 0 | PROGRAM SERVICES | PUBLICATIONS | | 15,600 |
| (5) | MIDDLE EAST AI AFRICA | | 0 | 0 | FUNDRAISING | | | 315 |
| (6) | NORTH AMERIC MEXICO ONLY) | | 0 | 0 | PROGRAM SERVICES | PUBLICATIONS | | 21,500 |
| (7) | NORTH AMERIC MEXICO ONLY) | | 0 | 0 | FUNDRAISING | NRA OUTDOOR | S | 2,800 |
| (8) | SUB-SAHARAN A | AFRICA | 0 | 0 | PROGRAM SERVICES | NRA OUTDOOR | S | 3,700 |
| (9) | EAST ASIA AND | THE PACIFIC | 0 | 0 | FUNDRAISING | | | 14 |
| (10) | | | | | | | | |
| | | | | | | | | |
| (11) | | | | | | | | |
| (12) | | | | | | | | |
| (13) | | | | | | | | |
| (14) | | | | | | | | |
| (15) | | | | | | | | |
| (16) | | | | | | | | |
| (17) | | | | | | | | |
| 3a | Subtotal | | 0 | 0 | | | | 3,401,949 |

sheets to Part I **c** Totals (add lines 3a and 3b) 0 0

0

0

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

Cat. No. 50082W

0

3,401,949

OMB No. 1545-0047

b Total from continuation

SCHEDULE F

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|------|--------------------------|--|---------------------|--|-----------------------------|--|--|--|--|
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
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| (14) | | | | | | | | | |
| (15) | | | | | | | | | |
| (16) | | | | | | | | | |
| 2 | by the IRS, o | r for which the g | rantee or counsel h | ed above that are rec has provided a sectio | n 501(c)(3) equivale | ncy letter | | ▶ | |
| 3 | | | | ties | | | | ► | edule E (Eorm 99 |

Schedule F (Form 990) 2019

| Part III can be duplica | ted if additional spa | ace is needed. | | | | | |
|---------------------------------|-----------------------|--------------------------|---------------------------------|---------------------------------------|--|--|--|
| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of noncash assistance | (g) Description of noncash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
| (1) | | | | | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
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| (18) | | | | | | | |

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

Schedule F (Form 990) 2019

| Part | IV Foreign Forms | | |
|------|---|-------|------|
| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | ☐ Yes | 🖌 No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) | ☐ Yes | 🖌 No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471) | Ves | ☑ No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) | ☐ Yes | 🖌 No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) | Ves | V No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990). | Yes | 🖌 No |

Schedule F (Form 990) 2019

Supplemental Information. Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); andPart III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

| Return Reference - Identifier | Explanation |
|---|---|
| SCHEDULE F, PART I, LINE 3 - 1. ACTIVITIES PER REGION-OFFSHORE INVESTMENTS | THE NRA'S OFFSHORE INVESTMENTS FOLLOW INDUSTRY STANDARD BEST PRACTICES IN RISK MANAGEMENT FOR NATIONAL NONPROFIT INSTITUTIONAL INVESTORS. ALTERNATIVE INVESTMENTS REDUCE OVERALL PORTFOLIO RISK BY REDUCING VOLATILITY AND IMPROVING DIVERSIFICATION. THE NRA MAINTAINS SEVERAL INVESTMENT ACCOUNTS THAT ARE MULTI-STRATEGY FUNDS OF FUNDS. INCOME FROM PASSIVE INVESTMENTS, WHEN APPROPRIATELY STRUCTURED, IS EXCLUDED FROM UNRELATED BUSINESS INCOME BY LAW. THIS TYPE OF INVESTMENT POSTURE IS COMMONLY ACCEPTED IN THE U.S. EXEMPT ORGANIZATION INDUSTRY. 100% OF THE AMOUNT IS THE TOTAL BOOK VALUE OF INVESTMENTS FOR THAT REGION. |
| SCHEDULE F, PART I, LINE 3 - ACTIVITIES PER REGION | THIS DISCLOSURE REFERS TO FOREIGN FUNDRAISING. 100% OF THE AMOUNT IS THE CASH VALUE OF EXPENDITURES MADE BY THE NRA FOR NECESSARY TRAVEL, ACCOMMODATIONS, AND RELATED EXPENSES. |
| SCHEDULE F, PART I, LINE 3 - ACTIVITIES PER REGION-PROGRAM SERVICES | THIS DISCLOSURE OF PROGRAM SERVICES REFERS TO NRA PUBLICATIONS DIVISION'S FOREIGN TRAVEL EXPENSES RELATING TO GATHERING MATERIALS FOR NRA MAGAZINES. 100% OF THE AMOUNT IS THE CASH VALUE OF EXPENDITURES MADE BY THE NRA FOR NECESSARY TRAVEL, ACCOMMODATIONS, AND RELATED EXPENSES. |
| SCHEDULE F, PART I, LINE 3 - METHOD TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS | CENTRAL AMERICA AND THE CARIBBEAN: ACCRUAL EAST ASIA AND THE PACIFIC: ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL MIDDLE EAST AND NORTH AFRICA: ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL SUB-SAHARAN AFRICA: ACCRUAL |

| | mental Information | | | | | OMB No. 1545-0047 | |
|---|---|--|---|---|--|--|--|
| (Form 990 or 990-EZ) Con | organization enter | i the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. | | | | | |
| Department of the Treasury Attach to Form 990 or Form 990-EZ. Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. | | | | | | Open to Public Inspection | |
| Name of the organization | | | | | Employer identific | | |
| NATIONAL RIFLE ASSOCIATION C | | | | | |)116130 | |
| | vities. Complete if th are not required to | | | vered "Yes" on I | -orm 990, Part IV, I | ine 17. | |
| 1 Indicate whether the orga | | • | | owing activities. C | heck all that apply. | | |
| a 🗹 Mail solicitations | | е 🗌 | | ion of non-govern | - | | |
| b \checkmark Internet and email sol c \checkmark Phone solicitations | icitations | f _ | | ion of government fundraising events | 0 | | |
| c Phone solicitations d In-person solicitations | 3 | g | | iunuraising events | 5 | | |
| 2a Did the organization have | a written or oral agree | | | | | | |
| or key employees listed in | | | | • | • | | |
| b If "Yes," list the 10 higher compensated at least \$5, | | | araisers) pi | ursuant to agreem | ients under which the | e fundraiser is to be | |
| (i) Name and address of individua or entity (fundraiser) | l (ii) Activity | custody o | draiser have or control of outions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col. (i) | (vi) Amount paid to (or retained by) organization | |
| | | Yes | No | | | | |
| ALLEGIANCE DBA MEMBERSHIP ADV 1 11250 WAPLES MILL RD, FAIRFAX, V | A 22030 FUNDRAISING CONSULTANT | | ~ | 47,634,979 | 1,080,000 | 46,554,979 | |
| 2 SPRINGSIDE DR, AKRON, OH 44 | P, 325 PAID 333 SOLICITOR | | ~ | 7,044,115 | 3,437,873 | 3,606,242 | |
| 501C SOLUTIONS, 2530 MERIDIAN PI 3 STE 300, RESEARCH TRIANGLE PAR 27713 | KWY, K, NC FUNDRAISING CONSULTANT | | ~ | 0 | 320,000 | (320,000) | |
| MCKENNA & ASSOCIATES, 2001 4 CALRENDON BLVD, STE 201, ARLINC VA 22202 | GTON, FUNDRAISING CONSULTANT | | ~ | 0 | 300,000 | (300,000) | |
| 5 STATION CIR, RESTON, VA 2019 | 1 FUNDRAISING CONSULTANT | | ~ | 0 | 72,000 | (72,000) | |
| 6 MONROE SR, STE F-341, ATLANTA, C 30324 | RS, 1579 FUNDRAISING GA CONSULTANT | | ~ | 0 | 60,000 | (60,000) | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| Total | | | ► | 54,679,094 | 5,269,873 | 49,409,221 | |
| 3 List all states in which th registration or licensing. | e organization is regist | tered or lic | ensed to s | | s or has been notifie | d it is exempt from | |
| AL, AK, AZ, AR, CA, CO, CT, DC, F | L, GA, HI, IL, KS, KY, LA, | ME, MD, MA | A, MI, MN, M | 1S, MO, NH, NJ, NM | I, NY, NC, ND, | | |
| OH, OK, OR, PA, RI, SC, TN, UT, V | A, WA, WV, WI | | | | | | |
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat. No. 50083H

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

| | | gross receipts greater that | 11 \$5,000. | | | |
|------------------------|--------|--|-------------------------------------|---|-------------------------|---|
| | | | (a) Event #1 NRAILA AUCTION | (b) Event #2 | (c) Other events | (d) Total events (add col. (a) through |
| | | | (event type) | (event type) | (total number) | (col. (c)) |
| Revenue | 1 | Gross receipts | 758,465 | 0 | | 758,465 |
| £ | 2 | Less: Contributions | 0 | 0 | | 0 |
| | 3 | Gross income (line 1 minus | • | | | <u>_</u> |
| | Ŭ | line 2) | 758,465 | 0 | 0 | 758,465 |
| | 4 | Cash prizes | 0 | 0 | 0 | 0 |
| | 5 | Noncash prizes | 0 | 0 | 0 | 0 |
| nses | 6 | Rent/facility costs | 42,908 | | | 42,908 |
| Direct Expenses | 7 | Food and beverages | 193,500 | | | 193,500 |
| Direct | 8 | Entertainment | 147,899 | | | 147,899 |
| | 9 | Other direct expenses . | 60,697 | | | 60,697 |
| | 10 | Direct expense summary. Ad | | | | 445,004 |
| | 11 | Net income summary. Subtra | act line 10 from line 3, c | olumn (d) | 🕨 | 313,461 |
| Pa | rt III | Gaming. Complete if th \$15,000 on Form 990-E2 | e organization answe Z, line 6a. | ered "Yes" on Form 9 | 90, Part IV, line 19, o | or reported more than |
| Revenue | | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (c)) |
| Rev | 1 | Gross revenue | | | | |
| ses | 2 | Cash prizes | | | | |

| Expens | • | N I I I | | | | |
|----------|---|----------------------------|----------------------------|----------------------------|--------------|--|
| X | 3 | Noncash prizes | | | | |
| Direct E | 4 | Rent/facility costs | | | | |
| ā | 5 | Other direct expenses . | | | | |
| | | | Yes % | Yes % | Yes % | |
| | 6 | Volunteer labor | □ No | □ No | No | |
| | 7 | Direct expense summary. Ac | d lines 2 through 5 in c | olumn (d) . . . | | |
| | 8 | Net gaming income summar | y. Subtract line 7 from li | ne 1, column (d) | | |
| | _ | | | | | |

| 9 | Enter the state(s) in which the organization conducts gaming activities: | | |
|---|---|---------|------|
| а | Is the organization licensed to conduct gaming activities in each of these states? | . 🗌 Yes | 🗌 No |
| b | If "No," explain: | | |
| | | | |
| | | | |
| | Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? | . 🗌 Yes | 🗌 No |
| b | If "Yes," explain: | | |
| | | | |
| | | | |

Schedule G (Form 990 or 990-EZ) 2019

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| Schedu | lle G (Form 990 or 990-EZ) 2019 Page 3 |
|--------|---|
| 11 | Does the organization conduct gaming activities with nonmembers? |
| 12 | Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? |
| 13 | Indicate the percentage of gaming activity conducted in: |
| а | The organization's facility |
| b | An outside facility |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records: |
| | Name ► |
| | Address ► |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming |
| iea | |
| b | If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the |
| | amount of gaming revenue retained by the third party ► \$ |
| С | If "Yes," enter name and address of the third party: |
| | Name ► |
| | Address ► |
| 16 | Gaming manager information: |
| | Name ► |
| | Gaming manager compensation \$ |
| | Description of services provided ► |
| | Director/officer Employee Independent contractor |
| 17 | Mandatory distributions: |
| а | Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? |
| b | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ |
| Part | Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. |
| SEE I | NEXT PAGE |
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Schedule G (Form 990 or 990-EZ) 2019

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

| Return Reference - Identifier | Explanation |
|--|---|
| SCHEDULE G, PART I, LINE 2B(II) - VENDOR INFOCISION MANAGEMENT CORP | THIS SUPPLEMENTAL INFORMATION NOTES THE DISTINCTION BETWEEN 990 CORE FORM PART VII SECTION B LINE 1 (2) AND SCHEDULE G PART I LINE 2B(2) FOR THE FILING ORGANIZATION'S VENDOR INFOCISION MANAGEMENT CORP. THE VENDOR INFOCISION PROVIDED SERVICES TO THE FILING ORGANIZATION FOR BOTH MEMBERSHIPS AND CONTRIBUTIONS SOLICITATIONS, AS SHOWN ON 990 CORE FORM PART VIII SECTION B LINE 1. SCHEDULE G IS SPECIFIC TO THE VENDOR'S WORK AS A PAID SOLICITOR PROVIDING PROFESSIONAL FUNDRAISING SERVICES. THEREFORE, THE SCHEDULE G DISCLOSURE EXCLUDES THE MEMBERSHIP PROCESSING SERVICES. |

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Attach to Form 990.

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



OMB No. 1545-0047

Name of the organization NATIONAL RIFLE ASSOCIATION OF AMERICA

53-0116130

Part I General Information on Grants and Assistance

| 1 | Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and | |
|---|--|--------|
| _ | the selection criteria used to award the grants or assistance? | ; 🗌 No |

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|--|--------------------|------------------------------------|-----------------------------|---------------------------------------|---|---------------------------------------|---|
| (SEE STATEMENT) | | | | | | | |
| | 52-1480785 | 501(C)(3) | 12,000 | | | | (SEE STATEMENT) |
| 2) | | | | | | | |
| 3) | | | | | | | |
| 4) | | | | | | | |
| 5) | | | | | | | |
| 6) | | | | | | | |
| 7) | | | | | | | |
| 8) | | | | | | | |
| 9) | | | | | | | |
| 0) | | | | | | | |
| 1) | | | | | | | |
| 2) | | | | | | | |
| 2 Enter total number of section | 1 501(c)(3) and go | / vernment organiza | tions listed in the l | ine 1 table | | | . ▶ 1 |
| 3 Enter total number of other o | | | | | | | |

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

| Part IIIGrants and Other Assistance to Depart III can be duplicated if additional | omestic Individu al space is neede | als. Complete if the d. | organization answe | ered "Yes" on Form 990, | , Part IV, line 22. |
|---|---------------------------------------|--------------------------------|----------------------------------|--|---------------------------------------|
| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of noncash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
| 1 (SEE STATEMENT) | 22 | 91,491 | 0 | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 Part IV Supplemental Information. Provide | the information i | required in Part I. lin | e 2: Part III. column | (b): and any other addit | ional information. |
| (SEE STATEMENT) | | / | , , | | |
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| | | | | | Schedule I (Form 990) (2019) |

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

| Return Reference - Identifier | Explanation |
|--|---|
| SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS. | THE NATIONAL FOUNDATION FOR WOMEN LEGISLATORS PARTNERS WITH THE NATIONAL RIFLE ASSOCIATION FOR THE ANNUAL NFWL/NRA BILL OF RIGHTS ESSAY SCHOLARSHIP CONTEST FOR FEMALE HIGH SCHOOL JUNIORS AND SENIORS. THE NRA ACTIVELY ASSISTS NATIONAL FOUNDATION OF WOMEN LEGISLATORS IN THE SELECTION AND ADMINISTRATION OF NFWL SCHOLARSHIPS FOR COLLEGE. NFWL SCHOLARSHIP APPLICATIONS ARE ASSESSED ON THE ELEMENTS OF HISTORICAL RESEARCH, INSIGHT AND PERSPECTIVE, DEMONSTRATED UNDERSTANDING OF THE AMERICAN CONSTITUTION, INSPIRATIONAL QUALITY, AND MEANINGFUL PERSONAL CONNECTION. SCHOLARSHIP AWARDS ARE PAID DIRECTLY TO THE EDUCATIONAL INSTITUTION. |
| SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT | NATIONAL FOUNDATION FOR WOMEN LEGISLATORS 910 16TH ST NW, WASHINGTON, DC 20006-2900 |
| SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE | NATIONAL FOUNDATION FOR WOMEN LEGISLATORS: UNDERGRADUATE COLLEGE SCHOLARSHIP |
| SCHEDULE I, PART III - LINE 1 | THE NRA JEANNE E. BRAY MEMORIAL SCHOLARSHIP AWARDS PROGRAM IS NAMED IN HONOR AND RECOGNITION OF THE GROUNDBREAKING POLICE OFFICER JEANNE E. BRAY, A SHOOTING CHAMPION AND PAST MEMBER OF THE NRA BOARD OF DIRECTORS. JEANNE E. BRAY WAS THE FIRST FEMALE DETECTIVE ON BURGLARY SQUAD, WHICH HAS EVOLVED INTO TODAY'S MODERN SWAT TEAMS. SHE WAS THE FIRST FEMALE POLICE OFFICER TO EARN THE NRA POLICE MARKSMANSHIP "DISTINGUISHED" BAR, AND SHE WON THE NATIONAL WOMEN'S POLICE PISTOL COMBAT CHAMPIONSHIP FIVE TIMES FROM 1962 TO 1967. THE PROGRAM OFFERS SCHOLARSHIPS OF UP TO \$2,500 PER SEMESTER, UP TO \$5,000 PER YEAR FOR A MAXIMUM OF FOUR YEARS, TO DEPENDENT CHILDREN OF ANY PUBLIC LAW ENFORCEMENT OFFICER KILLED IN THE LINE OF DUTY WHO WAS AN NRA MEMBER AT THE TIME OF DEATH, AND TO DEPENDENT CHILDREN OF ANY CURRENT OR RETIRED LAW ENFORCEMENT OFFICERS WHO ARE LIVING AND HAVE CURRENT NRA MEMBERSHIP. THE MEMBERSHIP RESTRICTION IS PERMITTED BY LAW BECAUSE THE NRA JEANNE E. BRAY MEMORIAL SCHOLARSHIP AWARDS PROGRAM IS A 501(C)(4) PROGRAM. SCHOLARSHIP AWARDS ARE PAID DIRECTLY TO THE EDUCATIONAL INSTITUTION. |
| SCHEDULE I, PART III, COLUMN A - TYPE OF GRANT | NRA JEANNE E BRAY MEMORIAL SCHOLARSHIP AWARDS |

| SCHEDULE J | | Compe | nsation Information | | OMB No. | 1545-0 | 047 |
|------------|--|---|---|----------------------|----------------------|--------|---------|
| (Form | 990) | For certain Officers, Dire | 20 | 19 |) | | |
| | | Complete if the organizati | mpensated Employees on answered "Yes" on Form 990, Par ▶ Attach to Form 990. | t IV, line 23. | Open t | | - |
| Internal I | ent of the Treasury Revenue Service | | 990 for instructions and the latest inf | | Insp | | |
| | f the organization | OCIATION OF AMERICA | | Employer identificat | on number 0116130 | | |
| Part | | ons Regarding Compensation | | | 5110150 | | |
| | | | | | | Yes | No |
| 1a | | ropriate box(es) if the organization pre ection A, line 1a. Complete Part III to p | | | orm | | |
| | | or charter travel | Housing allowance or residence | • | | | |
| | Travel for c | ompanions ification and gross-up payments | Payments for business use of Health or social club dues or ir | | | | |
| | | ry spending account | Personal services (such as ma | | | | |
| | | | | a, endancar, ener, | | | |
| b | or reimbursen | boxes on line 1a are checked, did the nent or provision of all of the ex | penses described above? If "No | | | | ~ |
| | | | | | . 10 | | |
| 2 | directors, trus | nization require substantiation pric tees, and officers, including the CE | O/Executive Director, regarding the | | | | |
| | 1a? | | | | · 2 | | V |
| 3 | organization's | n, if any, of the following the organiza CEO/Executive Director. Check all the zation to establish compensation of t | hat apply. Do not check any boxes | for methods used by | / a | | |
| | Compensat | tion committee | Written employment contract | | | | |
| | • | nt compensation consultant f other organizations | Compensation survey or study Approval by the board or complete | | , | | |
| 4 | organization o | r, did any person listed on Form 990 r a related organization: | | | | | |
| а | | erance payment or change-of-contro | | | . <u>4a</u> | ~ ~ | |
| b C | • | or receive payment from, a supplem or receive payment from, an equity-t | | | . 4b . 4c | | ~ |
| U | • | of lines 4a–c, list the persons and p | | | . 40 | | |
| 5 | For persons I | 501(c)(3), 501(c)(4), and 501(c)(29) c isted on Form 990, Part VII, Sect contingent on the revenues of: | | | any | | |
| а | 0 | on? | | | | ~ | |
| b | | ganization? | | | . 5b | | ~ |
| 6 | | isted on Form 990, Part VII, Sect contingent on the net earnings of: | ion A, line 1a, did the organizat | ion pay or accrue | any | | |
| а | • | on? | | | | | ~ |
| b | | ganization? | | | . <u>6b</u> | | |
| 7 | | isted on Form 990, Part VII, Section described on lines 5 and 6? If "Yes," | | | | ~ | |
| 8 | to the initial | ounts reported on Form 990, Part VII, contract exception described in | Regulations section 53.4958-4(a) | (3)? If "Yes," desc | ribe | | ~ |
| | | | | | | | |
| 9 | Regulations se | | | | | | |
| For Pa | perwork Reduct | ion Act Notice, see the Instructions for | r Form 990. Cat. No. 50 | 0053T S | chedule J (F | orm 99 | 0) 2019 |

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

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

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

| (A) Name and Title | | (B) Breakdown of | W-2 and/or 1099-MIS | SC compensation | (C) Retirement and | (D) Mantavakia | | (F) Compensation | |
|--|------|--------------------------|--|---|--------------------------------|----------------------------|--|--|--|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)–(D) | in column (B) reported as deferred on prior Form 990 | |
| MARION P HAMMER | (i) | 220,350 | 0 | 0 | 0 | 0 | 220,350 | 0 | |
| 1BOARD DIRECTOR | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| OLIVER L NORTH | (i) | 986,015 | 0 | 0 | 0 | 0 | 986,015 | 0 | |
| 2BOARD DIRECTOR | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| CHRIS COX | (i) | 744,676 | 0 | 767,906 | 16,800 | 43,143 | 1,572,525 | 652,997 | |
| 3EXECUTIVE DIRECTOR ILA 6/26/2019 | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| JOSEPH P DEBERGALIS, JR | (i) | 346,490 | 0 | 75,850 | 16,800 | 37,216 | 476,356 | 0 | |
| 4EXECUTIVE DIRECTOR GO | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| JOHN C FRAZER | (i) | 324,989 | 54,100 | 35,496 | 16,800 | 59,084 | 490,469 | 0 | |
| 5SECRETARY | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| WAYNE R LAPIERRE | (i) | 1,268,790 | 455,000 | 86,781 | 16,800 | 57,338 | 1,884,709 | 0 | |
| 6EXECUTIVE VICE PRESIDENT | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| JASON OUIMET | (i) | 393,922 | 0 | 3,182 | 16,574 | 48,590 | 462,268 | 0 | |
| 7EXECUTIVE DIRECTOR ILA | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| CRAIG B SPRAY | (i) | 566,437 | 210,000 | 29,274 | 16,800 | 53,227 | 875,738 | 0 | |
| 8TREASURER | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| TODD GRABLE | (i) | 437,958 | 187,744 | 11,130 | 16,800 | 48,309 | 701,941 | 0 | |
| 9EXECUTIVE DIRECTOR, MEMBERSHIP | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| DOUG HAMLIN | (i) | 455,666 | 100,000 | 61,166 | 16,800 | 62,782 | 696,414 | 0 | |
| 10 ^{EXECUTIVE DIRECTOR, PUBLICATIONS} | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| DAVID LEHMAN | (i) | 384,381 | 0 | 251,355 | 16,800 | 7,120 | 659,656 | 235,810 | |
| 11 DEPUTY EXECUTIVE DIRECTOR 9/13/2019 | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| JOSHUA L POWELL | (i) | 784,652 | 0 | 74,278 | 16,800 | 59,351 | 935,081 | 0 | |
| 12 ^{CHIEF OF STAFF AND SENIOR STRATEGIST} | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| TYLER SCHROPP | (i) | 718,429 | 75,000 | 7,911 | 16,784 | 51,889 | 870,013 | 0 | |
| 13 ^{EXECUTIVE DIRECTOR, ADVANCEMENT} | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| THOMAS R TEDRICK | (i) | 389,316 | 0 | 7,998 | 16,800 | 28,323 | 442,437 | 0 | |
| 14MANAGING DIRECTOR FINANCE | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| JOHN G PERREN | (i) | 350,000 | 0 | 9,906 | 8,885 | 3,411 | 372,202 | 0 | |
| 15SR. ADVISOR TO THE EVP | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| (SEE STATEMENT) | (i) | | | | | | | | |
| 16 | (ii) | | | | | | | | |

Schedule J (Form 990) 2019

Part II

| (a) | | (b) | | | (c) | (d) | (e) | (f) |
|---|------|--|---|---|-----------------------------|------------|------------------|---|
| Name | | Breakdown of W-2 and/or 1099-MISC compensation | | | Retirement and | Nontaxable | Total of columns | Compensation |
| | | (i) Base Compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (b)(i)-(d) | reported in prior Form 990 or Form 990-EZ |
| (16) WILSON H PHILLIPS | (i) | 232,366 | 0 | 427,020 | 4,985 | 0 | 664,371 | 426,309 |
| FÖRMER TREASURER 9/13/2018 | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (17) ROBERT K WEAVER | (i) | 0 | 0 | 240,000 | 0 | 0 | 240,000 | 0 |
| FORMER EXECUTIVE FORMER DIRECTOR GO 10/25/2016 | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

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.

| Return Reference - Identifier | Explanation |
|---|--|
| SCHEDULE J, PART I, LINE 1A - FIRST-CLASS OR CHARTER TRAVEL | CHARTER TRAVEL WAS USED ON OCCASIONS WHEN TRAVEL LOGISTICS OR SECURITY CONCERNS PRECLUDED OTHER AVAILABLE OPTIONS, AND TRAVEL WAS PROPERLY EXCLUDED FROM TAXABLE COMPENSATION. |
| SCHEDULE J, PART I, LINE 1A - HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES | DUES FOR CERTAIN EMPLOYEES MAINTAINING MEMBERSHIPS IN CLUBS FOR BUSINESS PURPOSES, ARE APPROVED THROUGH THE NRA'S STANDARD EXPENSE REIMBURSEMENT PROCESS. |
| SCHEDULE J, PART I, LINE 1A - HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE | HOUSING EXPENSES WERE PROVIDED FOR FOUR INDIVIDUALS AND WERE PROPERLY INCLUDED IN TAXABLE COMPENSATION. DOUG HAMLIN \$20,901, JOSHUA POWELL \$69,299, JOSEPH DEBERGALIS \$52,983, AND CRAIG B SPRAY \$3,500. |
| SCHEDULE J, PART I, LINE 1A - TAX INDEMNIFICATION AND GROSS-UP PAYMENTS | ONE INDIVIDUAL (TYLER SCHROPP) RECEIVED A DISCRETIONARY BONUS THAT WAS GROSSED UP. THE BONUS WAS TREATED AS TAXABLE COMPENSATION |
| SCHEDULE J, PART I, LINE 1A - TRAVEL FOR COMPANIONS | COMPANIONS OCCASIONALLY TRAVEL WITH NRA OFFICIALS. TRAVELS WERE PROPERLY EXCLUDED FROM TAXABLE COMPENSATION WHEN TRAVELING ON NRA BUSINESS. SEE SCHEDULE L FOR ADDITIONAL DISCLOSURES. |
| SCHEDULE J, PART I, LINE 1B - WRITTEN POLICY REGARDING PAYMENT OR REIMBURSEMENT OF EXPENSES | THE NRA HAS A WRITTEN POLICY FOR FIRST-CLASS TRAVEL. |
| SCHEDULE J, PART I, LINE 3 - METHODS USED TO ESTABLISH THE COMPENSATION | COMPENSATION OF THE NRA'S TOP MANAGEMENT OFFICIAL IS ESTABLISHED BY METHODS INCLUDING COMPENSATION SURVEYS AND STUDIES, AND COMPARABILITY DATA. COMPENSATION OF THE TOP MANAGEMENT OFFICIAL MUST BE APPROVED BY THE BOARD OF DIRECTORS, BASED ON RECOMMENDATIONS BY THE COMPENSATION COMMITTEE. ALL DECISIONS ARE PROPERLY DOCUMENTED. |
| SCHEDULE J, PART I, LINE 4A - SEVERANCE OR CHANGE-OF-CONTROL PAYMENT | ROBERT K. WEAVER'S EMPLOYMENT AS EXECUTIVE DIRECTOR OF GENERAL OPERATIONS ENDED IN 2016 AND DURING CALENDAR YEAR 2019 MR. WEAVER RECEIVED TAXABLE COMPENSATION OF \$240,000 AS YEAR 4 OF A 4 YEAR SEVERANCE AGREEMENT. |
| SCHEDULE J, PART I, LINE 4B - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN | THE NRA HAS DEFERRED COMPENSATION RETIREMENT BENEFIT PLANS FOR CERTAIN EMPLOYEES AND NONQUALIFIED SUPPLEMENTAL EXECUTIVE RETIREMENT PLANS FOR CERTAIN EMPLOYEES. FOR NONQUALIFIED PLANS, THE FILING ORGANIZATION DECIDES THE BENEFIT AMOUNT AND TIMEFRAME FOR VESTING OF EACH PARTICIPANT USING DIFFERENT FACTORS PARTICULAR TO EACH RELEVANT INDIVIDUAL AND HIS OR HER SPECIFIC CIRCUMSTANCES. PAYOUTS ARE PROPERLY INCLUDED IN TAXABLE WAGES AND REPORTED IN W-2 INCOME. THE AMOUNT FOR MR. COX INCLUDE \$246,031 457(F) DISBURSEMENT, FOR MR. PHILLIPS \$19,853 457(F) DISBURSEMENT, AND MR. LEHMAN \$51,213 457(F) DISBURSEMENT. |
| SCHEDULE J, PART I, LINE 5A - COMPENSATION CONTINGENT ON REVENUES OF THE ORGANIZATION | ONE INDIVIDUAL LISTED ON FORM 990, PART VII, SECTION A, LINE 1A, TODD GRABLE, RECEIVES INCENTIVE COMPENSATION BASED ON REVENUES RECEIVED FROM CERTAIN MARKETING, RECRUITING, AND LICENSING PROGRAMS. |
| SCHEDULE J, PART I, LINE 7 - NON-FIXED PAYMENTS | THREE INDIVIDUALS LISTED ON FORM 990, PART VII, SECTION A, LINE 1A (MR. LAPIERRE, MR. SPRAY AND MR. FRAZER) RECEIVED DISCRETIONARY BONUSES APPROVED BY THE BOARD OF DIRECTORS. TWO INDIVIDUALS (MR. SCHROPP AND MR. HAMLIN) RECEIVED DISCRETIONARY BONUSES APPROVED BY THEIR SUPERVISOR. |
| SCHEDULE J, PART II, COLUMN (B)(I) - OLIVER L NORTH | OLIVER L. NORTH RECEIVED \$986,015 PAID BY AN UNRELATED ORGANIZATION, ACKERMAN MCQUEEN (AS FURTHER DETAILED ON SCHEDULE O). JULIE GOLOB RECEIVED \$16,119 PAID BY AN UNRELATED ORGANIZATION, ACKERMAN MCQUEEN (AS FURTHER DETAILED ON SCHEDULE O) |
| SCHEDULE J, PART II, COLUMN (B)(III) - OTHER REPORTABLE COMPENSATION | OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. LAPIERRE INCLUDED \$63,036 GROUP LIFE INSURANCE, \$19,000 457(B) PLAN, AND \$4,745 TAXABLE PERSONAL EXPENSES. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. COX INCLUDED \$406,965 457(B) PAYOUT, \$246,031 457(F) PAYOUT, \$10,234 457(B) PLAN, \$3,735 GROUP LIFE INSURANCE, AND \$940 TAXABLE PERSONAL EXPENSES. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. PHILLIPS INCLUDED \$406,456 457(B) PAYOUT, \$19,853 457(F) PAYOUT, AND \$711 457(B) PLAN. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. POWELL INCLUDED \$70,048 TAXABLE PERSONAL EXPENSES AND \$4,230 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. SPRAY INCLUDED \$19,000 457(B) PLAN, \$7,100 TAXABLE PERSONAL EXPENSE, AND \$3,174 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. SPRAY INCLUDED \$19,000 457(B) PLAN, \$7,100 TAXABLE PERSONAL EXPENSE, AND \$3,174 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. FRAZER INCLUDED \$19,000 457(B) PLAN, \$12,652 TAXABLE PERSONAL EXPENSES, AND \$3,845 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. DEBERGALIS INCLUDED \$53,238 TAXABLE PERSONAL EXPENSES, \$19,000 457(B) PLAN, AND \$3,612 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. DUMET INCLUDED \$930 GROUP LIFE INSURANCE AND \$2,252 TAXABLE PERSONAL EXPENSES. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. OUIMET INCLUDED \$456,901 TAXABLE PERSONAL EXPENSES. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. GRABLE INCLUDED \$9,600 TAXABLE PERSONAL EXPENSES AND \$1,530 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. HAMLIN INCLUDED \$26,901 TAXABLE PERSONAL EXPENSES, \$19,000 457(B) PLAN, AND \$15,265 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. HAMLIN INCLUDED \$26,901 TAXABLE PERSONAL EXPENSES, \$19,000 457(B) PANO, AND \$15,265 GROUP LIFE INSURANCE. OTHER REPORT |

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| Return Reference - Identifier | Explanation |
|--|---|
| SCHEDULE J, PART II, COLUMN (C) - RETIREMENT AND OTHER DEFERRED COMPENSATION | EMPLOYER DEPOSITS TOWARD BENEFITS THAT WILL NOT BE PAID UNTIL A FUTURE DATE ARE SHOWN IN COLUMN C. THE AMOUNT FOR MR. LAPIERRE INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. COX INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. PHILLIPS INCLUDED \$4,985 401(K). THE AMOUNT FOR MR. POWELL INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. SPRAY INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. FRAZER INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. DEBERGALIS INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. SCHROPP INCLUDED \$16,784 401(K). THE AMOUNT FOR MR. GRABLE INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. HAMLIN INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. LEHMAN INCLUDED \$16,800 401(K). THE AMOUNT FOR MR. QUIMET INCLUDED \$16,574 401(K). THE AMOUNT FOR MR. TEDRICK INCLUDED \$16,800. THE AMOUNT FOR MR. PERREN INCLUDED \$8,885 |
| SCHEDULE J, PART II, COLUMN (D) - NONTAXABLE BENEFITS | COLUMN D NONTAXABLE BENEFITS ARE PROVIDED TO EMPLOYEES CONSISTENT WITH ASSOCIATION INDUSTRY STANDARDS AND BEST PRACTICES. STANDARD NONTAXABLE BENEFITS INCLUDE EMPLOYEE BENEFITS SUCH AS THE EMPLOYER PAID PORTIONS OF MEDICAL AND DENTAL PLANS AND LONG-TERM AND SHORT-TERM DISABILITY PLANS. |

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(Form 990 or 990-EZ) Department of the Treasury

Transactions With Interested Persons

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



Employer identification number

53-0116130

Internal Revenue Service Name of the organization

NATIONAL RIFLE ASSOCIATION OF AMERICA

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

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

| 1 | (a) Name of disqualified person | (b) Relationship between disqualified person and | (c) Description of transaction | | rected? | | | | |
|-----|---|--|--------------------------------|-----|---------|--|--|--|--|
| • | | organization | | Yes | No | | | | |
| (1) | JOSHUA POWELL | FORMER OFFICER | SEE PART V | | ~ | | | | |
| (2) | CHRISTOPHER COX | OFFICER | SEE PART V | | ~ | | | | |
| (3) | DAVID LEHMAN | HIGHEST COMPENSATED EMPLOYEE | SEE PART V | | ~ | | | | |
| (4) | WAYNE LAPIERRE | OFFICER | SEE PART V | ~ | | | | | |
| (5) | WILSON PHILLIPS | FORMER OFFICER | SEE PART V | | ~ | | | | |
| (6) | (SEE STATEMENT) | | | | | | | | |
| 2 | 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year | | | | | | | | |
| | under section 4958 | | | | | | | | |
| 3 | 3 Enter the amount of tax, if any on line 2 above, reimbursed by the organization | | | | | | | | |

Part II Loans to and/or From Interested Persons.

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

| (a) Name of interested person | (b) Relationship with organization | (c) Purpose of loan | fron | an to or 1 the zation? | (e) Original principal amount | (f) Balance due | (g) In c | lefault? | by bo | oroved oard or hittee? | (i) Wr agreer | |
|-------------------------------|------------------------------------|----------------------------|---------|------------------------------|-------------------------------|-----------------|-----------------|----------|-------|------------------------------|------------------|----|
| | | | То | From | | | Yes | No | Yes | No | Yes | No |
| (1) | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | |
| (5) | | | | | | | | | | | | |
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| (9) | | | | | | | | | | | | |
| (10) | | | | | | | | | | | | |
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| Part III Grants or Ass | sistance Benet | fiting Interest | ed Pers | sons. | | | | | | | | |

Grants or Assistance Benefiting Interested Persons.

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

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of assistance | (d) Type of assistance | (e) Purpose of assistance |
|-------------------------------|---|--------------------------|------------------------|---------------------------|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
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| (9) | | | | |
| (10) | | | | |

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

Cat. No. 50056A

Schedule L (Form 990 or 990-EZ) 2019

Part IVBusiness Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of in | nterested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sha organiz rever | aring of zation's nues? |
|-----------------------|--|--|---------------------------|--------------------------------|------------------------------------|-------------------------------|
| | | | | | Yes | No |
| (1) (SEE STATEMEN | NT) | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | _ | |
| (5) | | | | | | |
| (6) (7) | | | | | | |
| (8) | | | | | | |
| (9) | | | | | | |
| (10) | | | | | | |
| Part V Supplen | nental Information. additional information fo | or responses to questions | on Schedule L (see | instructions). | I | |
| (SEE STATEMENT) | | | | | | |
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Part Excess Benefit Transactions (continued)

| (a) Name of disqualified person | (b) Relationship between disqualified person and | (c) Description of transaction | (d) Cor | rected? |
|---------------------------------|--|--------------------------------|---------|---------|
| | organization | | Yes | No |
| (6) JOHN FRAZER | OFFICER | SEE PART V | | ~ |
| (7) OLIVER NORTH | DIRECTOR | SEE PART V | | ~ |
| (8) JOSEPH P DEBERGALIS, JR | OFFICER | SEE PART V | | ~ |

| Part IV | Business Transactions Involving Interested Persons (| continued) |
|---------|--|------------|
|---------|--|------------|

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sha organiz rever | ation's |
|-------------------------------|---|---------------------------|--|-----------------------------|---------|
| | | | | Yes | No |
| (1) MARION P HAMMER | BOARD DIRECTOR | \$220,000 | MARION P HAMMER PROVIDED CONSULTING SERVICES IN THE FORM OF ADVICE, ANALYSIS AND OTHER DUTIES REASONABLY ASSIGNED BY THE EXECUTIVE VICE PRESIDENT OF THE NRA AND EXECUTIVE DIRECTOR OF ILA DURING 2019. | | ~ |

| Return Reference - Identifier | Explanation |
|---|--|
| SCHEDULE L, PART I, LINE 1 - 1A. EXCESS BENEFIT TRANSACTIONS | THE NATIONAL RIFLE ASSOCIATION HAS IDENTIFIED WHAT IT BELIEVES ARE EXCESS BENEFIT TRANSACTIONS IN WHICH IT ENGAGED IN 2019 AND IN PRIOR CALENDAR YEARS OF WHICH IT BECAME AWARE BUT WERE NOT REPORTED ON ITS PRIOR FORMS 990. THESE TRANSACTIONS ARE EXPLAINED BELOW. THERE ARE OTHER TRANSACTIONS IN 2019 AND PRIOR CALENDAR YEARS THAT ARE STILL UNDER REVIEW BY THE NRA AND/OR ARE CURRENTLY SUBJECT TO DISPUTE IN THE FOLLOWING LEGAL PROCEEDINGS: |
| | 1.PEOPLE OF THE STATE OF NEW YORK, BY LETITIA JAMES, ATTORNEY GENERAL OF THE STATE OF NEW YORK V. THE NATIONAL RIFLE ASSOCIATION OF AMERICAN, INC., WAYNE LAPIERRE, WILSON PHILLIPS, JOHN FRAZER AND JOSHUA POWELL, PENDING IN THE SUPREME COURT OF THE STATE OF NEW YORK, [ALBANY COUNTY] INDEX NO. 451625/2020; |
| | 2.THE NATIONAL RIFLE ASSOCIATION OF AMERICA V. OLIVER NORTH, PENDING IN THE SUPREME COURT OF THE STATE OF NEW YORK, [ALBANY COUNTY] INDEX NO. 903843-20; |
| | 3.THE NATIONAL RIFLE ASSOCIATION OF AMERICA AND WAYNE LAPIERRE V. ACKERMAN MCQUEEN, INC., ET. AL., PENDING IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF TEXAS, DALLAS DIVISION, CIVIL ACTION NO. 3:19-CV-02074-G; AND |
| | 4.NATIONAL RIFLE ASSOCIATION OF AMERICA V. AMC MCQUEEN, INC. AND MERCURY GROUP, INC., PENDING IN THE CIRCUIT COURT OF THE CITY OF ALEXANDRIA, [VIRGINIA], CASE NOS.: CL19001757, CL19002067 AND CL19002886. |
| | THE NRA CANNOT AT THE TIME THIS FORM 990 IS FILED DETERMINE WHETHER THESE OTHER TRANSACTIONS ARE EXCESS BENEFIT TRANSACTIONS. |
| SCHEDULE L, PART I, LINE 1 - 1B. EXCESS BENEFIT TRANSACTIONS: JOSHUA POWELL | FROM 2016 THROUGH JANUARY 30, 2020, MR. POWELL SERVED THE NRA IN NUMEROUS CAPACITIES: EXECUTIVE DIRECTOR OF GENERAL OPERATIONS, CHIEF OF STAFF AND SENIOR STRATEGIST. THE NRA BELIEVES MR. POWELL WAS IN A POSITION TO SUBSTANTIALLY INFLUENCE ITS AFFAIRS BY EXERCISING OR SHARING THE RESPONSIBILITY FOR SUPERVISION, MANAGEMENT OR ADMINISTRATION OF ITS OPERATIONS. THEREFORE, THE NRA BELIEVES THAT MR. POWELL WAS A DISQUALIFIED PERSON WITHIN THE INTENDMENT OF SECTION 4958 OF THE INTERNAL REVENUE CODE ("CODE"). SEE TREAS. REG. SECT. 53.4958-3(E)(2). |
| | MR. POWELL CHARGED TO THE NRA, OR HAD REIMBURSED BY THE NRA, VARIOUS PERSONAL TRAVEL, CELLULAR AND OTHER EXPENSES WHICH MR. POWELL KNEW OR SHOULD HAVE KNOWN WERE NOT APPROPRIATE TO SUBMIT AS BUSINESS EXPENSES. PAYMENT OF THESE EXPENSES WERE NOT INTENDED BY THE NRA TO BE PART OF MR. POWELL'S COMPENSATION AND CONSTITUTE AUTOMATIC EXCESS BENEFITS UNDER TREASURY REGULATIONS SECTION 53.4958-4(C). THE AGGREGATE EXCESS BENEFIT DETERMINED TO BE PROVIDED TO MR. POWELL FROM 2016 THROUGH 2019 WAS \$54,904.45. ON MARCH 15, 2020, THE NRA MADE DEMAND FOR REPAYMENT OF \$57,522.12 (WHICH INCLUDED INTEREST). ON OR ABOUT JULY 9, 2020, MR. POWELL TENDERED A CHECK TO THE NRA FOR \$40,760.20, IN PURPORTED FULL SETTLEMENT. THE NRA HAS REJECTED THE CHECK, SO CORRECTION OF THE EXCESS BENEFIT HAS NOT YET BEEN MADE. THE AMOUNT OF EXCISE TAX DUE UNDER SECTION 4958 BY MR. POWELL IS DETERMINED TO BE \$13,726.11. IN ADDITION, THE NEW YORK STATE OFFICE OF THE ATTORNEY GENERAL HAS CHALLENGED, AS UNREASONABLE, COMPENSATION PAID TO MR. POWELL DURING THE PERIOD FROM 2016 THROUGH 2019. |
| SCHEDULE L, PART I, LINE 1 - 2. EXCESS BENEFIT TRANSACTIONS: CHRISTOPHER COX | FROM 2002 THROUGH JUNE 26, 2019, MR. COX SERVED AS THE EXECUTIVE DIRECTOR OF THE INSTITUTE FOR LEGISLATIVE ACTION ("ILA"), WHICH IS THE LEGISLATIVE AND POLITICAL DIVISION OF THE NATIONAL RIFLE ASSOCIATION. MR. COX WAS ALSO AN OFFICER OF THE NRA. BECAUSE (I) ILA'S FINANCES WERE MAINTAINED SEPARATELY FROM THOSE OF THE OTHER NRA DIVISIONS, (II) ILA MAINTAINED ITS OWN FISCAL STAFF, AND (III) MR. COX WAS AN OFFICER OF THE ORGANIZATION, THE NRA BELIEVES MR. COX WAS IN A POSITION TO SUBSTANTIALLY INFLUENCE ITS AFFAIRS AND IS THUS A DISQUALIFIED PERSON WITHIN THE INTENDMENT OF CODE SECTION 4958. TREAS. REG. SECT. 53.4958-3(E)(2)(IV), (V). |
| | THE NRA HAS BECOME AWARE THAT MR. COX IMPROPERLY USED ASSOCIATION FUNDS TO PAY PERSONAL EXPENSES CHARGED ON HIS PERSONAL CREDIT CARD, AMOUNTING TO UNAUTHORIZED INTEREST-FREE ADVANCES TO HIMSELF. IN ADDITION, MR. COX CAUSED EXPENSES TO BE PAID BY THE NRA, OR REIMBURSED TO HIM, FOR PERSONAL AND FAMILY TRAVEL, BUSINESS TRIPS UTILIZING UNAPPROVED CHARTER OR FIRST CLASS TRAVEL, TICKETS TO SPORTING/ENTERTAINMENT EVENTS, AND MEALS AND HOTEL EXPENSES WHICH WERE NOT APPROVED BY THE NRA. PAYMENT OF THESE EXPENSES WERE NOT INTENDED BY THE NRA TO BE PART OF MR. COX'S COMPENSATION AND THEREFORE CONSTITUTED AN AUTOMATIC EXCESS BENEFIT UNDER TREASURY REGULATIONS SECTION 53.4958-4(C). |
| | TO DATE, THE AGGREGATE EXCESS BENEFIT FROM 2015 TO JUNE 26, 2019, DETERMINED TO BE PROVIDED TO MR. COX IS IN EXCESS OF \$1 MILLION, WHICH THE NRA IS SEEKING TO RECOVER. THIS IS BEING DISPUTED BY MR. COX AND, TO DATE, ANY EXCESS BENEFIT RECEIVED BY MR. COX HAS NOT BEEN CORRECTED. THE NRA BELIEVES THAT THE AMOUNT OF EXCISE TAX DUE UNDER CODE SECTION 4958 BY MR. COX WOULD BE APPROXIMATELY \$328,001.50. |
| SCHEDULE L, PART I, LINE 1 - 3. EXCESS BENEFIT TRANSACTION: DAVID LEHMAN | FROM 2002 THROUGH SEPTEMBER 13, 2019, MR. LEHMAN SERVED AS DEPUTY EXECUTIVE DIRECTOR. AS SUCH, THE NRA BELIEVES MR. LEHMAN WAS IN A POSITION TO SUBSTANTIALLY INFLUENCE ITS AFFAIRS AND ILA'S AFFAIRS BY EXERCISING OR SHARING RESPONSIBILITY FOR SUPERVISION, MANAGEMENT OR ADMINISTRATION OF THEIR OPERATIONS. THEREFORE, THE NRA BELIEVES MR. LEHMAN WAS A DISQUALIFIED PERSON WITHIN THE INTENDMENT OF CODE SECTION 4958. TREAS. REG. SECT. 53.4958-3(E)(2). |
| | UPON INFORMATION AND BELIEF, FROM 2015 TO SEPTEMBER 13, 2019, MR. LEHMAN CAUSED THE NRA TO PAY FOR PERSONAL TRAVEL, CLUB, AND MEAL EXPENSES IN THE AGGREGATE AMOUNT OF AT LEAST \$87,595.83. THE NRA HAS NOT YET COMPLETED ITS INVESTIGATION OF THE EXTENT TO WHICH MR. LEHMAN MAY HAVE RECEIVED IMPROPER BENEFITS, BUT IF SUCH EXPENSES ARE SUBSTANTIATED, THEY WERE LIKELY NOT APPROVED NOR INTENDED TO BE COMPENSATION TO MR. LEHMAN BY THE NRA, AND WOULD THUS LIKELY CONSTITUTE AUTOMATIC EXCESS BENEFITS UNDER TREASURY REGULATIONS SECTION 53.4958-4(C). |

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| Return Reference - Identifier | Explanation |
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| SCHEDULE L, PART I, LINE 1 - 4. EXCESS BENEFIT TRANSACTION: WAYNE LAPIERRE | MR. LAPIERRE IS THE EXECUTIVE VICE PRESIDENT AND CHIEF EXECUTIVE OFFICER OF THE NRA. HE IS AN OFFICER AND IS THUS A DISQUALIFIED PERSON WITHIN THE INTENDMENT OF CODE SECTION 4958. TREAS. REG. SECT. 53.4958-3(C)(2). FROM 2015 THROUGH 2019, THE NRA ESTIMATES THAT IT PAID ON BEHALF OF MR. LAPIERRE, DIRECTLY OR INDIRECTLY, TRAVEL EXPENSES FOR MR. LAPIERRE IN THE AGGREGATE AMOUNT OF \$299,778.78. THE NRA HAS DETERMINED TO TREAT THE PAYMENTS AS AUTOMATIC EXCESS BENEFITS UNDER TREASURY REGULATIONS SECTION 53.4958-4(C). MR. LAPIERRE HAS REPAID THIS EXCESS BENEFIT TO NATIONAL RIFLE ASSOCIATION, PLUS INTEREST, AND THEREFORE THE EXCESS BENEFIT HAS BEEN CORRECTED. THE AMOUNT OF EXCISE TAX DUE UNDER CODE SECTION 4958 BY MR. LAPIERRE HAS BEEN ESTIMATED TO BE \$74,944.70. IN ADDITION, THE NEW YORK STATE OFFICE OF THE ATTORNEY GENERAL HAS CHALLENGED, AS UNREASONABLE, COMPENSATION PAID TO MR. LAPIERRE DURING HIS TENURE. |
| SCHEDULE L, PART I, LINE 1 - 5. EXCESS BENEFIT TRANSACTION: WILSON PHILLIPS | FROM 1993 THROUGH SEPTEMBER 13, 2018, MR. PHILLIPS SERVED AS TREASURER AND CHIEF FINANCIAL OFFICER OF THE NRA. AS SUCH, MR. PHILLIPS WAS A DISQUALIFIED PERSON WITHIN THE INTENDMENT OF CODE SECTION 4958. TREAS. REG. SECT. 53.4958-3(C)(3). THE NEW YORK STATE OFFICE OF THE ATTORNEY GENERAL HAS ALLEGED THAT COMPENSATION PAID TO |
| | MR. PHILLIPS DURING AND AFTER TENURE HIS TENURE WAS UNREASONABLE. |
| SCHEDULE L, PART I, LINE 1 - 6. EXCESS BENEFIT TRANSACTION: JOHN FRAZER | FROM 2015 THROUGH THE PRESENT, MR. FRAZER HAS SERVED AS SECRETARY AND GENERAL COUNSEL OF THE NRA. AS SUCH, MR. FRAZER MAY BE A DISQUALIFIED PERSON WITHIN THE INTENDMENT OF CODE SECTION 4958. TREAS. REG. SECT. 53.4958-3(E)(2). THE NEW YORK STATE OFFICE OF THE ATTORNEY GENERAL HAS ALLEGED THAT COMPENSATION PAID TO MR. FRAZER HAS BEEN UNREASONABLE. |
| SCHEDULE L, PART I, LINE 1 - 7. EXCESS BENEFIT TRANSACTION: OLIVER NORTH | LT. COL. NORTH SERVED AS PRESIDENT OF THE NATIONAL RIFLE ASSOCIATION AT TIMES IN 2018 AND 2019. WITHIN THE FIVE PRIOR YEARS, HE WAS ALSO A VOTING MEMBER OF ITS BOARD OF DIRECTORS. AS SUCH, MR. NORTH WAS A DISQUALIFIED PERSON WITHIN THE INTENDMENT OF CODE SECTION 4958. TREAS. REG. SECT. 53.4958-3(C)(1), (2). |
| | UPON INFORMATION AND BELIEF, DURING CERTAIN TIMES IN 2018 AND 2019, MR. NORTH WAS EMPLOYED BY ACKERMAN MCQUEEN, INC. ("AM"), A THIRD-PARTY VENDOR OF THE NATIONAL RIFLE ASSOCIATION, TO HOST A TELEVISION SHOW PRODUCED BY AM. DURING THE SAME PERIOD, AM INVOICED THE NRA FOR A VARIETY OF EXPENSES WHICH ARE NOW THE SUBJECT OF LITIGATION, BUT ARE BELIEVED TO HAVE INCLUDED SALARY, BENEFITS, AND RELATED PERQUISITES FURNISHED BY AM TO NORTH IN CONNECTION WITH NORTH'S EMPLOYMENT BY AM. NRA PAID ALL THESE INVOICES TO AM. SUCH PAYMENTS MAY CONSTITUTE AN INDIRECT BENEFIT FROM NATIONAL RIFLE ASSOCIATION TO MR. NORTH. TREAS. REG. SECT. 53.4958-4(A)(2)(III). AS FURTHER SET FORTH IN THE SAME LITIGATION, THE NRA HAS REASON TO BELIEVE THAT NORTH FAILED TO PERFORM THE SERVICES FOR WHICH HE HAD BEEN CONTRACTED BY AM, AND FOR WHICH HE MAY HAVE BEEN INDIRECTLY COMPENSATED BY THE NRA. IF THAT IS TRUE, THEN ALL OR PART OF NORTH'S COMPENSATION BY AM, PAID INDIRECTLY BY THE NRA. IF THAT IS TRUE, THEN ALL OR PART OF NORTH'S COMPENSATION BY AM, PAID INDIRECTLY BY THE NRA, WOULD CONSTITUTE AN EXCESS BENEFIT PROVIDED BY TO THE NRA TO NORTH. THE PENDING LITIGATION IN WHICH THE FOREGOING MATTERS ARE ALLEGED AND CONTESTED CONSISTS PRINCIPALLY OF: PEOPLE V. NAT'L RIFLE ASS'N OF AM., ET AL., INDEX NO. 451625/2020 (SUP. CT. N.Y. CNTY.); NAT'L RIFLE ASS'N OF AM. V. ACKERMAN MCQUEEN, INC. AND MERCURY GROUP, INC., CONS. CASE NOS. CL19002067; CL19001757; CL19002886 (VA. CIR. CT.); AND, NAT'L RIFLE ASS'N OF AM. V. ACKERMAN MCQUEEN, INC., ET AL., CIV. CASE NO. 3-19-CV- 02074-G (N.D. TEX.). |
| SCHEDULE L, PART I, LINE 1 - 8. EXCESS BENEFIT TRANSACTION: JOSEPH P DEBERGALIS, JR | FROM 2015 THROUGH EARLY 2017, JOSEPH P. DEBERGALIS, JR. WAS AN NRA DIRECTOR. FROM JANUARY 25, 2017 TO THE PRESENT, MR. DEBERGALIS HAS SERVED AS AN NRA EXECUTIVE AND OFFICER, INCLUDING AS THE EXECUTIVE DIRECTOR OF GENERAL OPERATIONS. AS SUCH, MR. DEBERGALIS MAY, AT SOME OR ALL TIMES, HAVE BEEN A DISQUALIFIED PERSON WITHIN THE INTENDMENT OF CODE SECTION 4958. TREAS. REG. SECT. 53.4958-3(C) (1), (E) (2) (IV), (V). THE NRA IS CURRENTLY REVIEWING WHETHER MR. DEBERGALIS MAY HAVE USED BUSINESS CLASS TRAVEL WITHOUT AUTHORIZATION REQUIRED UNDER THE NRA'S TRAVEL POLICY. AT THE TIME OF FILING, THE NRA IS UNABLE TO ESTIMATE THE AMOUNT OF EXCESS COSTS INCURRED, IF ANY. IF SUCH EXPENSES ARE SUBSTANTIATED, THEY WERE LIKELY NOT APPROVED NOR INTENDED TO BE COMPENSATION TO MR. DEBERGALIS BY THE NRA, AND WOULD THUS LIKELY CONSTITUTE AUTOMATIC EXCESS BENEFITS UNDER TREASURY REGULATIONS SECTION 53.4958-4(C). |
| SCHEDULE L, PART I, LINE 1 - 9. BOARD MEMBER TRAVEL | THE NRA IS CURRENTLY REVIEWING WHETHER IN 2019 AND PRIOR YEARS, VARIOUS BOARD MEMBERS MAY HAVE USED FIRST CLASS OR BUSINESS CLASS TRAVEL WITHOUT AUTHORIZATION REQUIRED UNDER THE NRA'S TRAVEL POLICY. AT THE TIME OF FILING, THE NRA IS UNABLE TO ESTIMATE THE AMOUNT OF EXCESS COSTS INCURRED, IF ANY. SUCH BOARD MEMBERS WOULD HAVE BEEN DISQUALIFIED PERSONS WITHIN THE INTENDMENT OF TREAS. REG. SECT. 53.4958-3(C)(1). IF SUCH EXCESS COSTS ARE SUBSTANTIATED, THEY WOULD THUS LIKELY CONSTITUTE EXCESS BENEFITS UNDER CODE SECTION 4958. |

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2019

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

000 for instr ctic d the latest inf ...: Go to

Name of the organization

NATIONAL RIFLE ASSOCIATION OF AMERICA

| www.irs.gov/Form990 | for instructions | and the latest | information. | |
|---------------------|------------------|----------------|--------------|--|
| | | | | |

Employer identification number

| 53-0116130 | | |
|------------|--|------------|
| | | 53-0116130 |

| Part | Types of Property | | | | | | | |
|----------|--|--------------------------------------|---|--|-----------------------|----------|---------|---------|
| | | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | Method noncash cor | | | |
| 1 | Art-Works of art | ~ | 1 | 5,000 | MARKET VA | LUE | | |
| 2 | Art-Historical treasures | | | | | | | |
| 3 | Art-Fractional interests | | | | | | | |
| 4 | Books and publications | | | | | | | |
| 5 | Clothing and household | | | | | | | |
| • | goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| 8 | Intellectual property | | | | | | | |
| 9 | Securities—Publicly traded | | | | | | | |
| 10 | Securities—Closely held stock . | | | | - | | | |
| 11 | Securities—Partnership, LLC, | | | | + | | | |
| | or trust interests | | | | | | | |
| 10 | Securities-Miscellaneous | | | | | | | |
| 12 | | | | | | | | |
| 13 | Qualified conservation contribution — Historic | | | | | | | |
| | structures | | | | | | | |
| 4.4 | Qualified conservation | | | | | | | |
| 14 | contribution-Other | | | | | | | |
| 15 | Real estate – Residential | | | | - | | | |
| 16 | Real estate—Commercial | | | | - | | | |
| 17 | Real estate – Other | | | | - | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | | | | | | | |
| 20 | Drugs and medical supplies | | | | | | | |
| 20 21 | Taxidermy | | | | | | | |
| 21 | Historical artifacts | | | | | | | |
| 22 | Scientific specimens | | | | | | | |
| 23 24 | Archeological artifacts | | | | | | | |
| 24 25 | Other ► ((SEE STATEMENT)) | | | | | | | |
| 25 26 | | | | | | | | |
| 20 27 | Other (| | | | | | | |
| 28 | Other ► () | | | | + | | | |
| | | by the or | anization during the tax i | veer for contributions for | | | | |
| 29 | Number of Forms 8283 received which the organization completed | | | | 29 | 0 | | |
| | | 11011110200 | , r arriv, bonee / loknowie | | 20 | | Yes | No |
| 00- | During the year did the eventies | | | auto una auto al im Dauto I, linea | | | 100 | |
| 30a | During the year, did the organiza 28, that it must hold for at least t | | | | | | | |
| | to be used for exempt purposes | | | | | 30a | | ~ |
| b | If "Yes," describe the arrangemen | | | | | | | |
| 31 | Does the organization have a | | stance policy that requir | es the review of any n | onstandard | | | |
| | contributions? | | | | | 31 | ~ | |
| 32a | Does the organization hire or us contributions? | | | | | 32a | ~ | |
| b | If "Yes," describe in Part II. | | | | | | | |
| 33 | If the organization didn't report an describe in Part II. | amount in | column (c) for a type of pro | operty for which column (a) | is checked, | | | |
| For Pap | perwork Reduction Act Notice, see the Ins | tructions for I | Form 990. | Cat. No. 51227J | Schedu | le M (Fo | orm 990 |)) 2019 |

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Part I

| Property Type | (a) Check If Applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|---|----------------------------|--|---|--|
| ENGRAVED CUSTOM MADE KNIFE | 1 | 1 | 19,000 | MARKET VALUE |
| SL3 OVER/UNDER SHOTGUN | 1 | 1 | 18,800 | MARKET VALUE |
| WINCHESTER MODEL 1873 RIFLE | 1 | 1 | 18,300 | MARKET VALUE |
| K-20 VICTORIA SOVEREIGN GRADE & LADIES ACCESSORY PACKAGE | ✓ | 1 | 17,000 | MARKET VALUE |
| ULTIMATE FDE PACKAGE | 1 | 1 | 15,000 | MARKET VALUE |
| 2 GUN PACKAGE - MRAD & M107 | 1 | 2 | 12,000 | MARKET VALUE |
| CUSTOM MADE LONG RANGE RIFLE TOPPED WITH NIGHTFORCE SCOPE CERTIFICATE | ~ | 1 | 12,000 | MARKET VALUE |
| MID ASIAN OR ALTAY IBEX HUNT FOR 1 HUNTER - SPAIN IBEX HUNT FOR 1 & IBEX MOUNT CERTIFICATE | ~ | 1 | 10,500 | MARKET VALUE |
| NEW ZEALAND RED STAG HUNT (2 STAGS) | ✓ | 1 | 10,000 | MARKET VALUE |
| TWO CUSTOM PISTOLS & HOLSTER PACKAGE | ✓ | 2 | 9,630 | MARKET VALUE |
| SET OF TWO UPPER AR RIFLE PACKAGE IN .224 VALKYRIE AND .223 | ✓ | 1 | 8,500 | MARKET VALUE |
| RAGING HUNTER WITH ENHANCEMENS BY DARK ALLIANCE, TRIJICON SCOPE AND SHOOTING EXPERIENCE | ~ | 1 | 8,500 | MARKET VALUE |
| TOUR PLANT, CUSTOM BUILT RIFLE PACKAGE | ✓ | 1 | 8,000 | MARKET VALUE |
| SPECIAL EDITION SWAT MODEL TWO RIFLE PACKAGE | 1 | 1 | 8,000 | MARKET VALUE |
| MODEL 1873 LEVER ACTION RIFLE | 1 | 1 | 8,000 | MARKET VALUE |
| NEW ZEALAND TAHR HUNT | 1 | 1 | 8,000 | MARKET VALUE |
| GOLD PLATED AK AND ADDITIONAL AK PACKAGE | 1 | 1 | 7,500 | MARKET VALUE |
| SPECIAL EDITION PAIR OF FAL RIFLES & CASE | 1 | 1 | 7,500 | MARKET VALUE |
| CERTIFICATE FOR A FOOD PLOT IMPLEMENT | 1 | 1 | 7,500 | MARKET VALUE |
| 2 DAY ALL-INCLUSIVE PHEASANT HUNT FOR 2 HUNTERS | ✓ | 1 | 7,500 | MARKET VALUE |
| HUNGARY WILD BOAR HUNT | 1 | 1 | 7,500 | MARKET VALUE |
| CUSTOM TURNBULL EDITION M1911 PISTOL | ✓ | 1 | 7,250 | MARKET VALUE |
| ESPACAZA SPAIN RED STAG HUNT | ~ | 1 | 7,000 | MARKET VALUE |

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

| Return Reference - Identifier | Explanation |
|---|---|
| SCHEDULE M, PART I, LINE 1 - THE NUMBER OF CONTRIBUTIONS OR THE NUMBER OF ITEMS | THE NATIONAL RIFLE ASSOCIATION IS REPORTING THE NUMBER OF ITEMS RECEIVED ON PART I, COLUMN B. |
| SCHEDULE M, PART I, LINE 32B - THIRD PARTIES USED TO SOLICIT, PROCESS, OR SELL NONCASH CONTRIBUTIONS | ON OCCASION AND AS APPROPRIATE, SECURITIES AND OTHER DONATED LIQUID OR ILLIQUID ASSETS CAN BE CONVERTED INTO CASH BY THE OUTSIDE THIRD PARTY SPECIALISTS THAT PARTNER WITH THE NRA TO FULFILL THE PHILANTHROPIC INTENTIONS OF THE DONORS. |

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.



Department of Treasury Internal Revenue Service

Name of the Organization NATIONAL RIFLE ASSOCIATION OF AMERICA

Open to Public Inspection

Employer Identification Number 53-0116130

| Return Reference - Identifier | Explanation |
|--|---|
| FORM 990, PART I, LINE 1 - THE ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES | THE NRA IS A 501(C)(4) MEMBERSHIP ASSOCIATION WITH FOUR 501(C)(3) PUBLIC CHARITIES AND A SECTION 527 POLITICAL ACTION COMMITTEE (PAC) WHICH IS A SEPARATE SEGREGATED FUND. THE FOUR CHARITIES AFFILIATED WITH THE NRA ARE NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION INC, NRA FREEDOM ACTION FOUNDATION, AND NRA SPECIAL CONTRIBUTION FUND DBA NRA WHITTINGTON CENTER. THE POLITICAL ACTION COMMITTEE IS NRA POLITICAL VICTORY FUND. SEE SCHEDULE R, PART II. |
| FORM 990, PART I, LINE 7A - UNRELATED BUSINESS REVENUE | THIS INFORMATIONAL NOTE REGARDS THE NRA'S UNRELATED BUSINESS INCOME. FORM 990 PAGE 1 SHOWS GROSS UNRELATED BUSINESS REVENUE ON LINE 7A AND NET UNRELATED BUSINESS TAXABLE INCOME ON LINE 7B. THE NRA DID NOT OWE UNRELATED BUSINESS INCOME TAX FOR THE YEAR 2019 BECAUSE DIRECTLY CONNECTED DEDUCTIONS WERE GREATER THAN THE ASSOCIATED INCOME IN 2019. THE MAIN SOURCES OF NRA UNRELATED BUSINESS INCOME, AS SHOWN ON 990 PART VIII, COLUMN C, ARE CERTAIN MERCHANDISE SALES FROM THE E COMMERCE PLATFORMS, ADVERTISING, AND OTHER ACTIVITIES NOT RELATED TO THE NRA'S TAXES ARE SHARED ON SCHEDULE C REGARDING 527(F) PROXY TAXES AND SCHEDULED REGARDING STATE AND LOCAL TAXES. THE NRA CHOOSES TO SHARE THIS EXTRA INFORMATION ABOUT THE TAXES IN ORDER TO DEMONSTRATE IN GOOD FAITH THAT THE ORGANIZATION IS A TAXPAYER IN GOOD STANDING. |
| FORM 990, PART I, LINE 8 - CONTRIBUTIONS AND GRANTS | THIS INFORMATIONAL NOTE REGARDS THE NRA'S CONTRIBUTION REVENUE. THE VAST MAJORITY OF CONTRIBUTIONS TO THE NRA COMES FROM MILLIONS OF SMALL INDIVIDUAL DONORS. GIFTS FROM COMPANIES AND EXECUTIVES IN THE FIREARMS, HUNTING, AND SHOOTING SPORTS INDUSTRIES TYPICALLY COMPRISE LESS THAN 5% OF THE NRA'S CONTRIBUTION REVENUE EVERY YEAR, AS APPLIED TO CONTRIBUTION REVENUE REPORTED ON FORM 990, PART VIII, LINE 1. |
| FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES | THIS NOTE PROVIDES FURTHER INFORMATION ON PART III PROGRAM SERVICE ACCOMPLISHMENTS. NRA PROGRAM SERVICES ARE CENTERED ON THE NRA'S CORE MISSION OF FIREARMS SAFETY, EDUCATION, AND TRAINING, INCLUDING MESSAGING THAT PROMOTES FREEDOM AND LIBERTY. THE ADDITIONAL PROGRAM SERVICE EXPENSES OF \$31,766,483 NOTED ON 990 CORE FORM PART III LINE 4D INCLUDE THE PROGRAM SERVICES COMPONENTS OF PUBLIC AFFAIRS, EXECUTIVE, AND ADVANCEMENT OPERATIONS. 990 READERS ARE ENCOURAGED TO ACCESS NRA.ORG FOR OPPORTUNITIES TO CONTINUE TO ENGAGE WITH THE NRA. |
| FORM 990, PART VI, LINE 1A - GOVERNING BODY | UNDER THE NRA'S BYLAWS, THE BOARD OF DIRECTORS ELECTS 20 DIRECTORS ANNUALLY TO SERVE ON AN EXECUTIVE COMMITTEE. THE PRESIDENT AND VICE-PRESIDENTS ALSO SERVE ON THE COMMITTEE, FOR A CURRENT TOTAL OF 23 MEMBERS. THE BYLAWS ALLOW THE COMMITTEE TO EXERCISE ALL POWERS OF THE BOARD WHEN THE BOARD IS NOT IN SESSION, WITH CERTAIN ENUMERATED EXCEPTIONS. THE LAWS OF NEW YORK GOVERNING NOT-FOR-PROFIT CORPORATIONS ALSO PROVIDE LIMITS ON THE AUTHORITY OF EXECUTIVE COMMITTEES. |
| FORM 990, PART VI, LINE 2 - FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS | CARRIE LIGHTFOOT & OWEN MILLS - BUSINESS RELATIONSHIP IL LING NEW & OWEN MILLS - BUSINESS RELATIONSHIP KRISTY TITUS & SANDRA FROMAN - BUSINESS RELATIONSHIP |
| FORM 990, PART VI, LINE 2 - OFFICER, DIRECTOR, TRUSTEE, OR KEY EMPLOYEE RELATIONSHIP | SEVERAL NRA DIRECTORS ARE EMPLOYED IN THE FIREARMS INDUSTRY AS MANUFACTURERS OR SELLERS OF FIREARMS, AMMUNITION, OR COMPONENTS THEREOF. THESE BOARD MEMBERS ROUTINELY BUY AND SELL PRODUCTS FROM ONE ANOTHER IN THE ORDINARY COURSE OF BUSINESS. |
| FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS | THE NATIONAL RIFLE ASSOCIATION AMENDED THE BYLAWS IN 2019 TO CHANGE THE QUALIFICATIONS TO BE ON THE BOARD OF DIRECTORS. IN ADDITION TO PREVIOUS QUALIFICATIONS, THE INDIVIDUAL MUST ALSO BE A LIFETIME MEMBER OF THE ASSOCIATION FOR A MINIMUM OF FIVE YEARS AT THE TIME OF NOMINATION FOR THE BOARD OF DIRECTORS |
| FORM 990, PART VI, LINE 5 - DIVERSION OF ORGANIZATION ASSETS | THE NATIONAL RIFLE ASSOCIATION BECAME AWARE DURING 2019 OF A SIGNIFICANT DIVERSION OF ITS ASSETS DURING 2019 AND FOR PRIOR CALENDAR YEARS. SEE SCHEDULE L, PART V FOR AN EXPLANATION. IN ADDITION, A STAFF EMPLOYEE (WHO WAS NOT A DISQUALIFIED PERSON, MANAGER, KEY EMPLOYEE OR HIGHLY COMPENSATED EMPLOYEE) DIVERTED \$41,820.37 FROM THE NRA BUT HAS FULLY REPAID THE ORGANIZATION, INCLUDING INTEREST, FOR A TOTAL OF \$56,241.35. |
| FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS | THE NATIONAL RIFLE ASSOCIATION IS A MEMBERSHIP ASSOCIATION THAT REPRESENTS ONLY INDIVIDUAL CITIZENS. MEMBERSHIP DUES ARE PROPERLY REPORTED ON FORM 990, PART VIII, LINE 2 PURSUANT TO THE INSTRUCTIONS FOR SUCH REPORTING. |
| FORM 990, PART VI, LINE 7A - MEMBERS OR STOCKHOLDERS ELECTING MEMBERS OF GOVERNING BODY | NRA MEMBERS ELECT ALL 76 MEMBERS OF THE NRA BOARD OF DIRECTORS. 75 DIRECTORS ARE ELECTED FOR STAGGERED THREE YEAR TERMS, AND THE 76TH DIRECTOR IS ELECTED FOR ONE YEAR TERM ON THE OCCASION OF EACH ANNUAL MEETING OF MEMBERS. AT THE END OF 2019, NRA HAD 73 DIRECTORS DUE TO UNFILLED VACANCIES. |

| Return Reference - Identifier | Explanation |
|---|--|
| FORM 990, PART VI, LINE 7B - DECISIONS REQUIRING APPROVAL BY MEMBERS OR STOCKHOLDERS | CERTAIN RECOMMENDATIONS BY THE BOARD OF DIRECTORS ARE SUBJECT TO MEMBERSHIP APPROVAL PER NRA BYLAWS AND NEW YORK NOT FOR PROFIT CORPORATE LAW |
| FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY | DRAFTS OF FORM 990 ARE REVIEWED BY THE EXTERNAL ACCOUNTING FIRM, PRESENTED TO THE NRA BOARD OF DIRECTORS AUDIT COMMITTEE, AND MADE AVAILABLE TO BOARD MEMBERS ATTENDING THE BOARD OF DIRECTORS MEETING. THE NRA'S ELECTED OFFICERS AND AUDIT COMMITTEE LEADERSHIP REVIEW A FINAL DRAFT BEFORE FILING. |
| FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY | THE ORGANIZATION'S CONFLICT OF INTEREST POLICY APPLIES TO OFFICERS, DIRECTORS, AND KEY EMPLOYEES OF THE FILING ORGANIZATION AND ITS AFFILIATES, AS WELL AS TO THEIR RELATIVES. RELATED PARTY TRANSACTIONS AND POTENTIAL CONFLICTS ARE SELF-REPORTED ON A QUESTIONNAIRE THAT IS DISTRIBUTED AT LEAST ANNUALLY AND REVIEWED BY THE SECRETARY AND GENERAL COUNSEL. |
| FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL | COMPENSATION OF THE NRA'S TOP MANAGEMENT OFFICIAL IS ESTABLISHED BY METHODS INCLUDING COMPENSATION SURVEYS AND STUDIES, AND COMPARABILITY DATA. COMPENSATION OF THE TOP MANAGEMENT OFFICIAL MUST BE APPROVED BY THE BOARD OF DIRECTORS, BASED ON RECOMMENDATIONS BY THE COMPENSATION COMMITTEE. ALL DECISIONS ARE PROPERLY DOCUMENTED. |
| FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES | COMPENSATION OF SALARIED OFFICERS AND KEY EMPLOYEES OTHER THAN THE NRA'S TOP MANAGEMENT OFFICIAL IS ESTABLISHED BY METHODS INCLUDING (DEPENDING ON THE POSITION) COMPENSATION SURVEYS AND STUDIES, AND COMPARABILITY DATA. COMPENSATION OF THE SECRETARY AND THE TREASURER MUST BE APPROVED BY THE BOARD OF DIRECTORS, BASED ON RECOMMENDATIONS BY THE COMPENSATION COMMITTEE. ALL DECISIONS ARE PROPERLY DOCUMENTED. |
| FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED | CO, CT, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NE, NH, NJ, NM, NV, NY, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY |
| FORM 990, PART VI, LINE 18 - AVAILABILITY OF 990 FOR PUBLIC INSPECTION | READERS ARE POLITELY REMINDED THE NRA WAS FOUNDED 148 YEARS AGO, IN 1871. THE NRA'S 1944 DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE IS AVAILABLE ON GUIDESTAR.ORG AND CAN ALSO BE REQUESTED DIRECTLY FROM THE NRA AS REQUIRED BY LAW. FORMS 990 CAN BE REQUESTED DIRECTLY FROM THE NRA AS REQUIRED BY LAW. |
| FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC | THE ORGANIZATION'S ANNUAL REPORT (INCLUDING AUDITED FINANCIAL STATEMENTS) IS AVAILABLE UPON REQUEST. ITS ARTICLES OF INCORPORATION ARE A PUBLIC RECORD AVAILABLE FROM THE STATE OF NEW YORK, AND ITS BYLAWS ARE AVAILABLE TO MEMBERS BY MAIL UPON REQUEST. THE NRA'S CONFLICT OF INTEREST POLICY IS NOT AVAILABLE TO THE PUBLIC |
| FORM 990, PART VII, SECTION A, LINE 1A - THE NRA BOARD OF DIRECTORS COMPENSATION | THIS INFORMATIONAL NOTE REGARDS SERVICE ON THE NRA BOARD OF DIRECTORS, WHICH IS NOT COMPENSATED. BOARD MEMBERS WHO RECEIVED COMPENSATION IN 2019 WERE COMPENSATED FOR OTHER REASONS, NOT FOR THEIR VOLUNTARY BOARD SERVICE. MR. BUTZ, MS. HAMMER, MR. KEENE, MR. NUGENT, MR. OLSON, AND MR. SKELTON WERE COMPENSATED FOR OTHER PROFESSIONAL SERVICES THEY PERFORMED FOR THE ORGANIZATION. MR. BACH MR. BROWNELL, MR. COTTON, MS. LIGHTFOOT, MR. MILLS, MR. TED NUGENT, AND MS. WALKER RECEIVED MEMBERSHIP RECRUITING COMMISSIONS THAT WERE PAID TO THEIR COMPANIES. FOR THE PURPOSE OF DETERMINING THE COUNT OF INDEPENDENT DIRECTORS AS OF DECEMBER 31, 2019 SHOWN ON PART I LINE 3 AND PART VI LINE 1B, THE TEN DIRECTORS NOT CONSIDERED INDEPENDENT FOR 2019 WERE MR. NORTH, MS. HAMMER, MR. KEENE, MR. NUGENT, MR. BUTZ, MS. GOLOB, MR. OLSON, MR. SKELTON, MR. NOSLER, AND MR. BROWNELL |
| FORM 990, PART VII, SECTION A, LINE 5 - COMPENSATION FROM UNRELATED ORGANIZATION | THE NRA HAS COMPLETED SCHEDULE J REPORTING FOR DIRECTOR OLIVER NORTH, WHO REPORTED COMPENSATION OF \$986,015 FROM AN UNRELATED ORGANIZATION, ACKERMAN MCQUEEN, INC., FOR PROFESSIONAL SERVICES RELATED TO PRODUCTION AND HOSTING OF AN ONLINE VIDEO SERIES FOR THE NRA. UPON INFORMATION AND BELIEF, THE NRA ESTIMATES THAT THIS SELF-REPORTED AMOUNT IS ONLY A FRACTION OF THE ACTUAL AMOUNT PAID BY THE NRA TO ACKERMAN MCQUEEN FOR COL. NORTH'S SERVICES, AND THAT THE TOTAL PAID EXCEEDS THE VALUE RECEIVED DUE TO (AMONG OTHER THINGS) ACKERMAN'S FAILURE TO PRODUCE ALL OF THE EPISODES FOR WHICH THE NRA CONTRACTED. THE RELATIONSHIP BETWEEN COL. NORTH, ACKERMAN MCQUEEN, AND THE NRA IS CURRENTLY THE SUBJECT OF LITIGATION IN THE CASES LISTED ON SCHEDULE L. |
| | THE NRA HAS ALSO COMPLETED SCHEDULE J REPORTING FOR DIRECTOR JULIE GOLOB, WHO REPORTED COMPENSATION OF \$16,119 FROM ACKERMAN MCQUEEN FOR PROFESSIONAL SERVICES PERFORMED ON NRA DIGITAL MEDIA PROJECTS. |
| FORM 990, PART VII, SECTION B, LINE 1 - HIGHEST COMPENSATED INDEPENDENT CONTRACTORS | THIS INFORMATIONAL NOTE PROVIDES ADDITIONAL DETAIL ABOUT AMOUNTS PAID TO OUTSIDE SERVICES PROVIDERS. THE FILING ORGANIZATION REPORTS COMPENSATION PAID TO SERVICES PROVIDERS EXCLUSIVE OF ADVERTISING AND OTHER MEDIA PLACED ON BEHALF OF THE FILING ORGANIZATION AND EXPENSES INCURRED ON BEHALF OF THE FILING ORGANIZATION. FOR EXAMPLE, THE FIGURE OF \$7,317,206 STATED ON PART VII SECTION B LINE 1 REFLECTS COMPENSATION FOR SERVICES PAID TO ACKERMAN MCQUEEN INC. |

| Return Reference - Identifier | Explanation | |
|--|---|---|
| FORM 990, PART VIII, LINE 2B - MEMBERSHIP DUES | THIS INFORMATIONAL NOTE REGARDS THE REPORTING OF MEMBER DUES ON F OF THE REVENUE STATEMENT IS PROPERLY LEFT BLANK. PURSUANT TO 990 INS MEMBERSHIP DUES THAT ARE NOT CONTRIBUTIONS BECAUSE THEY COMPARE AVAILABLE BENEFITS ARE SHOWN ON LINE 2. THUS, ALL NRA MEMBER DUES AR SHOWN ON THE 990 REVENUE STATEMENT AS PROGRAM SERVICE REVENUE ON THAN NRA LIFE-PLUS CONTRIBUTIONS WHICH ARE PROPERLY COUNTED AS COI REVENUE IN LINE 1F OF THE 990 REVENUE STATEMENT. | STRUCTIONS, REASONABLY WITH E PROPERLY N LINE 2, OTHER |
| FORM 990, PART IX, LINE 11 - FEES FOR SERVICES | THIS INFORMATIONAL NOTE REGARDS THE NRA'S PAYMENT OF FEES FOR OUTS PROFESSIONAL SERVICES AS STATED ON LINE 11 OF THE 990 EXPENSE STATEM REPORTS LEGAL FEES PAID TO OUTSIDE ATTORNEYS, SUCH AS FOR SECOND A WORK AND RELATED LITIGATION AT THE FEDERAL AND STATE LEVELS AND FOR COMPLIANCE MATTERS, AND CORPORATE LITIGATION. LINE 11C REPORTS ACCO TO THE OUTSIDE CPA FIRM THAT PROVIDES THE NRA'S AUDITING AND TAX SERV REPORTS LOBBYING EXPENSE PAID TO EXTERNAL REGISTERED LOBBYISTS. LIN FUNDRAISING COSTS PAID TO THE AUTHORIZED VENDORS LISTED ON SCHEDUL REPORTS INVESTMENT MANAGEMENT FEES PAID TO INVESTMENT ADVISORS TH NRA'S PORTFOLIOS. LINE 11G SHOWS TELEMARKETING COSTS FOR MEMBERSH PROFESSIONAL SERVICES PERFORMED BY NRA EMPLOYEES (IN HOUSE COUNS ACCOUNTANTS, IN HOUSE LOBBYISTS, IN HOUSE FUNDRAISERS, AND IN HOUSE MANAGERS, RESPECTIVELY) ARE PROPERLY REPORTED WITHIN LINES 5-7 OF TI STATEMENT, AS REQUIRED BY 990 FORM INSTRUCTIONS. PROFESSIONAL SERVI BY THE TELEMARKETING VENDOR FOR FUNDRAISING PURPOSES, RATHER THAN MEMBERSHIP, ARE PROPERLY REPORTED WITHIN LINE 11E, AS REQUIRED BY 990 INSTRUCTIONS. | MENT. LINE 11B MENDMENT CASE & REGULATORY, DUNTING FEES PAID VICES. LINE 11D VICES. LINE 11F HAT MANAGE THE INP SERVICING. IP SERVICING. IN HOUSE INVESTMENT HE 990 EXPENSE ICES PERFORMED N FOR |
| FORM 990, PART IX, LINE 24E - ALL OTHER EXPENSES | THIS RESPONSE EXPLAINS \$13,258,411 OF OTHER EXPENSES STATED ON LINE 2 PART IX EXPENSE STATEMENT WHICH WERE NOT ACCOMMODATED BY OTHER I DESCRIPTIONS. THIS FIGURE INCLUDES \$7,229,130 OF FULFILLMENT MATERIALS BANKING FEES, \$1,032,468 MEMBERSHIP PREMIUMS, \$328,452 OF NON-PAYROLL | EXPENSE LINE 5, \$4,261,888 |
| FORM 990, PART X, LINE 15 - OTHER ASSETS | THIS INFORMATIONAL NOTE PROVIDES ADDITIONAL DETAIL ABOUT OTHER ASSE AFFILIATES INCLUDED IN ACCOUNTS RECEIVABLE IN THE PRIOR YEAR HAVE BEI TO OTHER ASSETS TO CONFORM WITH CURRENT YEAR PRESENTATION | |
| FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES | THIS RESPONSE EXPLAINS \$(750,566) OF OTHER CHANGES IN THE NET ASSETS SCHEDULE. THE FIGURE INCLUDES \$3,534,160 AGENCY TRANSACTIONS BETWEE NRA FOUNDATION; \$2,040,070 ADOPTION OF ASC 606, AND \$122,132 UNREALIZED DERIVATIVE INSTRUMENT, AND OTHER NET PENSION PLAN LOSS (6,446,928). THI TRANSACTIONS FIGURE OF \$3,534,160 INCLUDES ENDOWMENT CONTRIBUTIONS EARNINGS DESIGNATED BY NRA FOUNDATION DONORS FOR ELIGIBLE NRA PRO | EN THE NRA AND O GAIN ON E AGENCY S AND ENDOWMENT |
| FORM 990, PART XI, LINE 9 - | (a) Description | (b) Amount |
| OTHER CHANGES IN NET ASSETS OR FUND BALANCES | AGENCY TRANSACTIONS BETWEEN THE NRA AND NRA FOUNDATION | 3,534,162 |
| | UNREALIZED GAIN ON DERIVATIVE INSTRUMENT | 122,132 |
| | ADOPTION OF ASC 606 | 2,040,070 |
| | OTHER NET PENSION PLAN LOSS | - 6,446,928 |

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.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

NATIONAL RIFLE ASSOCIATION OF AMERICA

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

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

Part II

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

| (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | conti | (g) ection 512(b)(13 controlled entity? | |
|--------------------------------|---|---|---|---|--|---|--|
| | | | | | Yes | No | |
| CHARITABLE | DC | 501(C)(3) | 7 | NRA | ~ | | |
| | | | | | | | |
| CHARITABLE | NM | 501(C)(3) | 7 | NRA | ~ | | |
| | | | | | | | |
| CHARITABLE | VA | 501(C)(3) | 7 | NRA | ~ | | |
| | | | | | | | |
| CHARITABLE | VA | 501(C)(3) | 7 | NRA | ~ | | |
| | | | | | | | |
| PAC/SSF | VA | 527 POL. ORG. | | NRA | ~ | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE | CHARITABLE DC CHARITABLE NM CHARITABLE VA CHARITABLE VA CHARITABLE VA | or foreign country) CHARITABLE DC S01(C)(3) CHARITABLE NM S01(C)(3) CHARITABLE VA S01(C)(3) CHARITABLE VA S01(C)(3) CHARITABLE VA S01(C)(3) CHARITABLE VA S01(C)(3) | CHARITABLE DC 501(C)(3) 7 CHARITABLE DC 501(C)(3) 7 CHARITABLE NM 501(C)(3) 7 CHARITABLE VA 501(C)(3) 7 | CHARITABLEDC501(C)(3)entityCHARITABLEDC501(C)(3)7CHARITABLENM501(C)(3)7CHARITABLEVA501(C)(3)7CHARITABLEVA501(C)(3)7CHARITABLEVA501(C)(3)7CHARITABLEVA501(C)(3)7NRA00 | CHARITABLE DC 501(C)(3) NRA ✓ CHARITABLE DC 501(C)(3) 7 NRA ✓ CHARITABLE VA 501(C)(3) 7 NRA ✓ | |

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Cat. No. 50135Y

94



Open to Public

Inspection

Employer identification number

53-0116130

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of- year assets | (h Dispropo allocat | ortionate | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | General or managing | | (k) Percentage ownership |
|---|--------------------------------|--|-------------------------------------|---|--|--|---------------------------|-----------|---|--|----|---------------------|--|---------------------------------------|
| | | | | | | | Yes | No | | Yes | No | | | |
| (1) (SEE STATEMENT) | | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | | | |
| (5) | | | | | | | | | | | | | | |
| (6) | | | | | | | | | | | | | | |
| .(7) | | | | | | | | | | | | | | |

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. Part IV

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | (i Section 5 contr enti | i) 12(b)(13) rolled ity? |
|---|--------------------------------|---|-------------------------------------|---|--|---------------------------------------|---------------------------------------|----------------------------------|-----------------------------------|
| | | | | | | | | Yes | No |
| (1) (SEE STATEMENT) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| (5) | | | | | | | | | |
| (6) | | | | | | | | | |
| (7) | | | | | | | | | |

Schedule R (Form 990) 2019

Part V

| Note | : Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | | | | Yes | No |
|-------------------------|---|---------------------------|--------------------------|------------------------------|---------|---------|------|
| 1 | During the tax year, did the organization engage in any of the following transactions with one | or more related organ | izations listed in Parts | s II–IV? | | | |
| а | Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | | | 1a | ~ | |
| b | Gift, grant, or capital contribution to related organization(s) | | | | 1b | | ~ |
| с | Gift, grant, or capital contribution from related organization(s) | | | | 1c | ~ | |
| d | Loans or loan guarantees to or for related organization(s) | | | | 1d | ~ | |
| е | Loans or loan guarantees by related organization(s) | | | | 1e | ~ | |
| | o y o (<i>y</i> | | | ţ | | | |
| f | Dividends from related organization(s) | | | | 1f | | ~ |
| a | Sale of assets to related organization(s) | | | | 1g | | ~ |
| ĥ | Purchase of assets from related organization(s) | | | | 1h | | ~ |
| i | Exchange of assets with related organization(s) | | | | 1i | | ~ |
| i | Lease of facilities, equipment, or other assets to related organization(s) | | | | 1j | | ~ |
| , | | | | | -, | | |
| k | Lease of facilities, equipment, or other assets from related organization(s) | | | | 1k | | ~ |
| i | Performance of services or membership or fundraising solicitations for related organization(s) | | | | 11 | ~ | - |
| m. | Performance of services or membership or fundraising solicitations by related organization(s) | | | | 1m | | ~ |
| n | Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | 1n | ~ | • |
| 0 | Sharing of paid employees with related organization(s) | | | | 10 | ~ | |
| U | | | | | 10 | • | |
| p | Reimbursement paid to related organization(s) for expenses | | | | 1p | | ~ |
| ч q | Reimbursement paid by related organization(s) for expenses | | | | 1g | ~ | • |
| ч | | | | | - 4 | • | |
| r | Other transfer of cash or property to related organization(s) | | | | 1r | V | |
| s | Other transfer of cash or property from related organization(s) | | | | 1s | • | ~ |
| 2 | If the answer to any of the above is "Yes," see the instructions for information on who must co | | | | | shol | - |
| | · · · · · · · · · · · · · · · · · · · | • | | • | | 51101 | us. |
| | (a) Name of related organization | (b) Transaction | (c) Amount involved | (d) Method of determining | amoun | t invol | ved |
| | | type (a-s) | | - | | | |
| NF | A FOUNDATION INC | Α | 180.000 | CASH VALUE | | | |
| | | | 100,000 | | | | |
| _(1) NF | A FOUNDATION INC | С | 12,073,526 | CASH VALUE | | | |
| (2) | | Ũ | 12,010,020 | | | | |
| _(2) NF | A FOUNDATION INC | E | 5,000,000 | CASH VALUE | | | |
| (2) | | - | 0,000,000 | | | | |
| _(3) | A FOUNDATION INC | 0 | 11 088 682 | CASH VALUE | | | |
| (4) | | U | 11,000,002 | | | | |
| _(4) NF | A FOUNDATION INC | Q | 1 100 204 | CASH VALUE | | | |
| (5) | | Q | 4,109,204 | | | | |
| (5) | E STATEMENT) | | | | | | |
| | | | | | | | |
| (6) | | | | | . /= | 0000 | 0010 |
| | | | | Schedule R | ((⊢orm | 1 990) | 2019 |

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

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

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

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

Schedule R (Form 990) 2019

| Part III | Identification of Related Organizations Taxable as a Partnership (c | continued) |
|----------|---|------------|
|----------|---|------------|

| (a) Name, address and EIN of related organization | (b) Primary Activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income related, unrelated, excluded from tax under sections 512- 514 | (f) Share of total income | assets | tion | rópor ate ation ? | (i) Code V - UBI amount in box 20 of Schedule K- 1 (Form 1065) | 0 | ieral or aging ner? | |
|--|----------------------|--|-------------------------------------|---|---------------------------|--------|------|----------------------------|---|---|------------------------------|-------|
| (1) WBB INVESTMENTS, LLC (32-0569014) 11250 WAPLES MILL RD, FAIRFAX, VA 22030 | INVESTMENT | DE | NRA | N/A | 0 | 0 | | 1 | | < | | 99.00 |

| Part IV | Identification of Related Organizations Taxable as a Corporation or Trust (continued) |
|---------|---|
|---------|---|

| (a) Name, address and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C-corp, S-corp or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | (i) Se 512(b contr enti | o)(13) olled |
|--|-------------------------|---|-------------------------------------|--|---------------------------|---------------------------------------|-----------------------------|----------------------------------|-----------------|
| | | | | | | | | Yes | No |
| (1) LEXINGTON CONCORD HOLDINGS LLC (83-1798978) 11250 WAPLES MILL RD, FAIRFAX, VA 22030 | DEVELOPMENT PHASE | DE | NRA | C CORPORATION | 0 | 0 | 100.00 | ~ | |
| (2) NRA HOLDINGS COMPANY INC (02-0558658) 11250 WAPLES MILL RD, FAIRFAX, VA 22030 | MANAGEMEN T SERVICES | VA | NRA | C CORPORATION | 0 | 0 | 100.00 | ~ | |

Part V Transactions with Related Organizations (continued)

| (a) Name of other organization | (b) Transaction type (a-s) | (c) Amount Involved | (d) Method of determining amount involved |
|-------------------------------------|----------------------------|---------------------|---|
| (6) NRA CIVIL RIGHTS DEFENSE FUND | С | 652,384 | CASH VALUE |
| (7) NRA CIVIL RIGHTS DEFENSE FUND | Q | 41,831 | CASH VALUE |
| (8) NRA SPECIAL CONTRIBUTION FUND | A | 353,051 | CASH VALUE |
| (9) NRA SPECIAL CONTRIBUTION FUND | Q | 1,881,719 | CASH VALUE |
| (10) NRA POLITICAL VICTORY FUND | R | 3,952 | CASH VALUE |
| (11) LEXINGTON CONCORD HOLDINGS LLC | Q | 98,926 | CASH VALUE |
| (12) NRA FREEDOM ACTION FOUNDATION | Q | 977,377 | CASH VALUE |
| (13) NRA POLITICAL VICTORY FUND | Q | 2,908,114 | CASH VALUE |

| Return Reference - Identifier | Explanation |
|--|---|
| SCHEDULE R, PART II - IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS | THE NRA IS A 501(C)(4) MEMBERSHIP ASSOCIATION WITH FOUR 501(C)(3) PUBLIC CHARITIES AND A SECTION 527 POLITICAL ACTION COMMITTEE (PAC) WHICH IS A SEPARATE SEGREGATED FUND. THE FOUR CHARITIES AFFILIATED WITH THE NRA ARE NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION INC, NRA FREEDOM ACTION FOUNDATION, AND NRA SPECIAL CONTRIBUTION FUND DBA NRA WHITTINGTON CENTER. THE POLITICAL ACTION COMMITTEE IS NRA POLITICAL VICTORY FUND; NRAPVF IS A SEPARATE UNINCORPORATED PAC OF THE NRA. IN THE EVENT THAT ANY FUNDS ARE RECEIVED BY THE NRA AND EARMARKED TO THE PAC, THE NRA HAS SYSTEMS IN PLACE TO ENSURE ANY SUCH RECEIPTS ARE PROMPTLY AND IMMEDIATELY DEPOSITED INTO THE SEPARATE SEGREGATED FUND'S ACCOUNT. |
| SCHEDULE R, PART III - WBB INVESTMENTS, LLC | WBB INVESTMENTS, LLC WAS FORMED IN CONNECTION WITH A POSSIBLE TRANSACTION THAT WAS NEVER ULTIMATELY EXECUTED. A CERTIFICATE OF CANCELLATION HAS BEEN FILED AND THE ENTITY WAS DISSOLVED IN 2019. |
| SCHEDULE R, PART V, LINE 1C - GIFT, GRANT, OR CAPITAL CONTRIBUTION FROM RELATED ORGANIZATION | THIS INFORMATIONAL NOTE REGARDS QUALIFIED CHARITABLE GRANT MAKING. ALL GRANTS MADE BY NRA FOUNDATION, NRA CIVIL RIGHTS DEFENSE FUND, AND NRA FREEDOM ACTION FOUNDATION TO THE NRA ARE SUBJECT TO STRINGENT REVIEW PROCESSES REQUIRING THAT THE GRANTS BE MADE AND USED ONLY FOR QUALIFIED CHARITABLE PURPOSE PROGRAMS. THE NRA IS REQUIRED TO PROVIDE DOCUMENTATION TO THE CHARITIES THAT PROCEEDS WERE USED BY THE NRA FOR QUALIFIED CHARITABLE PURPOSES AS SET FORTH IN THE GRANT DOCUMENTS. |
| SCHEDULE R, PART V, LINE 1E - LOANS OR LOAN GUARANTEES BY RELATED ORGANIZATION | THE NRA ENTERED A SECURED LOAN AGREEMENT WITH THE NRA FOUNDATION. THE \$5,000,000 LOAN IS PAYABLE TO THE NRA FOUNDATION AT A FAIR VALUE INTEREST RATE. THE NRA MAKES MONTHLY INTEREST PAYMENTS OF 7%. |

| Form 8453-E0 | Exempt | Organization Declaration and Signature | e for | OMB No. 1545-0047 |
|--|---|---|---------------|----------------------|
| | For calendar year 20 | Electronic Filing 19, or tax year beginning, 2019, and ending | , 20 | 2019 |
| Department of the Treasury Internal Revenue Service | | se with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868 | | |
| Name of exempt organization | n | | Employer iden | tification number |
| NATIONAL RIFLE ASSO | DCIATION OF AMER | ICA | 5 | 3-0116130 |
| Check the box for the check the box on line leave line 1b , 2b , 3b , | e type of return be 1a, 2a, 3a, 4a, or 4b, or 5b, whichev | urn Information (Whole Dollars Only) eing filed with Form 8453-EO and enter the applicable amou 5a below and the amount on that line of the return being file er is applicable, blank (do not enter -0-). If you entered -0- or more than one line in Part I. | ed with this | form was blank. then |
| 1a Form 990 check 2a Form 990-EZ ch 3a Form 1120-POL 4a Form 990-PF ch 5a Form 8868 chec | eck here ► □ check here ► □ eck here ► □ | b Total revenue, if any (Form 990, Part VIII, column (A), lin b Total revenue, if any (Form 990-EZ, line 9) b Total tax (Form 1120-POL, line 22) b Tax based on investment income (Form 990-PF, Part V b Balance due (Form 8868, line 3c) | /I, line 5) . | 2b 3b 4b |
| Part II Declarat | tion of Officer | | | |

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
 - If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/ 990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

| Sign Here | N | Wan 2Pm | 11/17/20 | EXECUTIVE VICE PRESIDENT |
|--------------|---|----------------------|----------|--------------------------|
| | ŗ | Signature of officer | Date | Title |

| and in Providential of Electronic field in Originator (Ento) and Faid Freparer (See instruction | Part III | Declaration of Electronic Return Originator (ERO) and Paid Preparer (| (see instruction | S) |
|---|----------|---|------------------|----|
|---|----------|---|------------------|----|

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

| ERO's | ERO's signature | Date | Check if also paid preparer | Check if self- employed | ERO's SSN or PTIN | | | |
|---|--|------|-----------------------------------|-------------------------------|-------------------|--|--|--|
| Use | Firm's name (or vours if self-employed). | | | 1 | EIN | | | |
| Only | address, and ZIP code | | | 1 | Phone no. | | | |
| Under penalties of periupy I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge | | | | | | | | |

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

| Paid Preparer | Print/Type preparer's name Preparer's signature | | Date | Check if PTIN self- employed | |
|-----------------------|---|-----------|--------------|------------------------------------|--|
| Use Only | Firm's name | | Firm's EIN ► | | |
| | Firm's address ► | | | Phone no. | |
| E . B . | | A 154 5 6 | | | |

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