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Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

139,630,906

24,150,294

144,162,625

5,663,756

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

Internal Revenue Service A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011 D Employer identification number B Check if applicable NATIONAL RIFLE ASSOCIATION OF AMERICA Address change 53-0116130 Doing Business As E Telephone number Name change (703) 267-1000 ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite G Gross receipts \$ 242,679,834 11250 WAPLES MILL ROAD Terminated City or town, state or country, and ZIP + 4 FAIRFAX, VA 220307400 Amended return Application pending Name and address of principal officer $\mathbf{H(a)}$ Is this a group return for WILSON H PHILLIPS JR affiliates? 11250 WAPLES MILL RD FAIRFAX, VA 22030 H(b) Are all affiliates included? If "No," attach a list (see instructions) 501(c)(3) **✓** 501(c) (4) **◄** (insert no) Tax-exempt status √ 4947(a)(1) or
√ 527 Group exemption number 🕨 H(c) Website: ► www nra org L Year of formation 1905 M State of legal domicile NY Summary Part I 1 Briefly describe the organization's mission or most significant activities TO PROTECT AND DEFEND THE U.S. CONSTITUTION TO PROMOTE PUBLIC SAFETY, LAW AND ORDER, AND THE NATIONAL DEFENSE TO TRAIN LAW ENFORCEMENT AGENCIES TO TRAIN CIVILIANS IN MARKSMANSHIP TO FOSTER Activities & Governance AND PROMOTE THE SHOOTING SPORTS TO PROMOTE HUNTER SAFETY 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 76 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 72 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . 5 754 6 125,000 **6** Total number of volunteers (estimate if necessary) . **7a** Total unrelated business revenue from Part VIII, column (C), line 12 . 7a 20,741,261 **b** Net unrelated business taxable income from Form 990-T, line 34 7b -243,730 **Prior Year Current Year** 59,382,983 71,145,801 Contributions and grants (Part VIII, line 1h) . . . 107,083,801 109,729,088 Program service revenue (Part VIII, line 2g) . . . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 3,460,273 3,362,284 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 46,121,404 46,509,175 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 227,811,279 218,983,530 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 219,500 92,000 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 Expenses 51,666,650 50,733,831 5 - 10) Professional fundraising fees (Part IX, column (A), line 11e) 7.989.955 6.126.261 16a Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright $\underline{^{26,416,192}}$ b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 183,658,170 174,119,497 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 243,534,275 231,071,589 19 Revenue less expenses Subtract line 18 from line 12 . -15,722,996 -12,088,059 Net Assets or Fund Balances **Beginning of Current End of Year** Year 149,826,381 Total assets (Part X, line 16) . . . 163.781.200

Part II Signature Block

20

21

22

Under penalties of perjury, I declare that I have examined this return, including acco knowledge and belief, it is true, correct, and complete. Declaration of preparer (other knowledge.

Net assets or fund balances Subtract line 21 from line 20 $\,$.

Total liabilities (Part X, line 26)

Sign	Signature of officer								
Here	WILSON H PHILLIPS JR TREASURER AND CFO								
	Type or print name and title								
Paid	Preparer's signature JAMES P SWEENEY	Date 2012-11-07							
Preparer's Use Only	Firm's name (or yours MCGLADREY LLP if self-employed),								
OGC OINY	address, and ZIP + 4 8000 TOWERS CRESCENT DR STE 500								
	VITENINA VA 22104								

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

Part TV	Checklist	of Rea	uired	Sched	dules
	CIICCNIISC	VI 11C-U	un cu	201121	44163

	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f 2}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	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? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	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 \cdot . \cdot . \cdot $	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	30	Yes	

Form 990 (2011) Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
_	· · · · · · ·			
	1a 865			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
L	return			
U	That least one is reported on line 2a, did the organization me an required lederal employment tax returns.	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
la	Did the organization have unrelated business gross income of \$1,000 or more during the	2-	V	
h	year?	3a 3b	Yes Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	36	163	
	over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	90		
-		5c		
ia	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	Yes	
Ь	organization solicit any contributions that were not tax deductible?			
U	were not tax deductible?	6b	Yes	
,	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	7a		
h	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	70		
	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
е	contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	.		
	required?	7g		
"	Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. DId			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
, _	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 49662	9a		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
.0	Section 501(c)(7) organizations. Enter	20		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
_				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
r	Enter the aggregate amount of reserves on hand			
-	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Voc " has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule O	11h		

Form 990 (2011) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for Part VI a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax 1a 76 Enter the number of voting members included in line 1a, above, who are 1b 72 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any Νo 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? . Νo Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Νo 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Yes Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Yes or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Each committee with authority to act on behalf of the governing body? Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Νo Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a 10a Did the organization have local chapters, branches, or affiliates? . Nο **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes the form? **b** Describe in Schedule O the process, if any, used by the organization to review the Form 990 . **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes b Were officers, directors or trustees, and key employees required to disclose annually interests that could give Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes Did the organization have a written whistleblower policy? 13 Yes 13 **14** Did the organization have a written document retention and destruction policy? 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Yes Other officers or key employees of the organization . 15b Yes If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the States with which a copy of this Form 990 is required to be filed ►WV, WI, WA, VA, UT, TN, SC, RI, PA, OR, OK, OH, NY , NM , NJ , NH , ND , NC , MS , MO , MN , ME , MD , MA , LA , KY , KS , IL , GA , FL , DC , CT , CO , CA , AZ , AR , AL , ΑК Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply ☐ Own website ☐ Another's website ☐ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of

- interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization NATIONAL RIFLE ASSOCIATION OF AMERI 11250 WAPLES MILL ROAD

FAIRFAX, VA 220307400

(703) 267-1000

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

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

(A) Name and Title	(B) A verage hours per week (describe hours (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					eck K, oth	I	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
See Additional Data Table										
										_

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

	(A) Name and Title	(B) Average hours per week (describe	unles an	on (d e thai	n one son er ai	e bo ıs b nd a	x, oth		Rep comp fro organiz	(D) ortable ensation m the zation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		ated fother sation the ion and	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organıza	
See A	odditional Data Table													
												_		
												_		
1b	Sub-Total							<u> </u> ▶						
	Total from continuation sheets	to Part VII, Sec		· ·	<u> </u>	•		F						
d	Total (add lines 1b and 1c) .							 -		5,459,548				677,304
2	Total number of individuals (incl \$100,000 of reportable compens						above) who	receive	ed more tha	n			
3	Did the organization list any form	•				ey e	mploy	ee, d	or highes	t compens	ated employee		Yes	No
4	on line 1a? <i>If "Yes," complete Sch</i> For any individual listed on line 1					nens	• sation	• and	otherco	mnensation	from the	3		No
·	organization and related organization											4	Yes	
5	Did any person listed on line 1a services rendered to the organiz											5		No
S	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio												
	Nan	(A) ne and business ad	dress							Desci	(B) ription of services		(C Comper	
325 9	CISION SPRINGSIDE DR NN, OH 44333									MEMBERSHII	PROC SOLICITOR		11	,992,378
1735 ARLIN	MASTER N LYNN ST IGTON, VA 22209									POSTAGE SH	IPPING		8	,601,705
FORE	OX 114 ST, VA 24551									FULFILLMEN ⁻	CENTER		8	,441,736
11 CO PALM	COAST DATA DMMERCE BLVD COAST, FL 32164									MEMBERSHII	PROCESSING		8	,375,531
	MUNICATIONS CORP OF AMERICA 5 FREEDOM WAY									 FUNDRAISIN	G PRINTING MAILING	₃	7	,086,902

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►46

Form 99			-f Davidson					Page 9
Part \	/** 1	Statement o	or Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
#\$ E	1a	Federated camp	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
S, Ç	c	Fundraising eve	ents 1c					
<u>≅</u> ,≅	d	Related organiz	zations 1d	11,752,195				
E, S	e	Government grants	s (contributions) 1e					
er s	f	All other contribution	ons, gifts, grants, and 1f ot included above	47,630,788				
^듩	g	Noncash contri	butions included in					
멸	[lines 1a-1f \$ _	 s 1a-1f	_	59,382,983			
<u>O @</u>	h	Total. Add lines	5 1 a - 1 î		39,302,903			
e III	2a	PROGRAM FEES		Business Code	7,000,000	7 000 000		
ever	b	MEMBER DUES			7,088,869 102,640,219	7,088,869 102,640,219		
or ⊊	c	HEMBER DOES			102,640,219	102,640,219		
rwc	d							
Š	e							
Tan	f	All other progra	am service revenue					
Program Service Revenue	_		s 2a-2f		400 720 000			
	g 3		ome (including dividen		109,729,088			
			ar amounts)		831,749			831,749
	4		stment of tax-exempt bond	F				
	5	Royalties	<u> </u>		12,699,066			12,699,066
		_	(ı) Real	(II) Personal				
	6a b	Gross rents Less rental	1,297,941 1,563,181					
		expenses	-265,240					
	C	Rental income or (loss)						
	d	Net rental incor	me or (loss)	,	-265,240			-265,240
	7a	Gross amount	(ı) Securities 18,302,274	(II) Other				
	"	from sales of assets other	, ,					
	Ь	than inventory Less cost or	15,771,739					
		other basis and sales expenses						
	c	Gain or (loss)	2,530,535					
	d	Net gain or (los	ss)	▶	2,530,535			2,530,535
Other Revenue	8a	Gross income fi events (not incl \$	luding s reported on line 1c)					
교 라			а	461,951				
Ě	b c		penses b (loss) from fundraising	104,760 events ►	357,191			357,191
•	9a		rom gaming activities		001,232			
		See Part IV, lin	ne 19					
	١.		a					
	b с	Less direct ex	penses b (loss) from gamıng actı	vities				
		Gross sales of returns and allo	inventory, less					
	_		a	18,359,469				
	b		oods sold b	6,256,624	12,102,845	10,903,027	1,199,818	
	С	Miscellaneous	(loss) from sales of inv	entory Business Code	12,102,643	10,903,027	1,199,010	
	11a	ADVERTISING		541800	19,709,792	108,114	19,541,443	60,235
	ь	SUBSCRIPTIO	_	541800	1,502,891	1,502,891		
	С	NRA CAFE SAL		722210	402,630			402,630
	d	-	ue					
	e	Total. Add lines	s 11a-11d		21,615,313			
	12	Total revenue.	See Instructions .	▶	218,983,530	122,243,120	20,741,261	16,616,166
							F	Form 990 (2011)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	36,000	36,000	, ,	· · · · · · · · · · · · · · · · · · ·
2	Grants and other assistance to individuals in the United States See Part IV, line 22	56,000	56,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	30,000		
4	Benefits paid to or for members	0		1	
5	Compensation of current officers, directors, trustees, and key employees	2,824,084	1,292,593	1,319,527	211,964
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	33,498,556	22,914,376	8,149,648	2,434,532
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,866,055	4,036,257	2,352,638	477,160
9	Other employee benefits	5,070,331	3,221,835	1,496,130	352,366
10	Payroll taxes	2,474,805	1,572,563	730,254	171,988
11	Fees for services (non-employees)			<u> </u>	·
а	Management	0			
Ь	Legal	5,470,641	5,285,386	185,255	
c	Accounting	120,700	-,,	120,700	
d	Lobbying	0		,	
e	Professional fundraising See Part IV, line 17	6,126,261			6,126,261
f	Investment management fees	213,513		213,513	3,123,231
g g	Other	3,847,478	3,847,478		
12	Advertising and promotion	23,778,126	17,745,488	 	6,032,638
13	Office expenses	3,683,341	2,136,857	1,546,484	0,032,030
14	Information technology	6,394,473	3,722,862	2,671,611	
15	Royalties	0,334,473	3,722,002	2,071,011	
16	Occupancy	1,940,830	969,331	971,499	
17	Travel	5,616,298	4,271,427	1,344,871	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	3,616,298	4,2/1,42/	1,344,671	
19	Conferences, conventions, and meetings	5,910,937	4,744,328	1,166,609	
20	Interest	1,384,341	994,755	389,586	
21	Payments to affiliates	0	13.,.33		
22	Depreciation, depletion, and amortization	2,608,179	1,897,055	711,124	
23	Insurance	1,051,058	1,051,058	,	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	, ,	, ,		
а	MEMBER COMMUNICATIONS	45,464,069	36,683,383		8,780,686
b	PRINTING AND SHIPPING	22,677,546	22,677,546		_
c	ASC 715 PENSION ACCOUNTING	14,036,169	8,476,208	5,559,961	
d	PROGRAM SERVICES	16,293,766	16,293,766		
e					
f	All other expenses	13,628,032	10,001,326	1,798,109	1,828,597
25	Total functional expenses. Add lines 1 through 24f	231,071,589	173,927,878	30,727,519	26,416,192
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		-		rm 990 (2011)

Pa	rt X	Balance Sheet						
						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				Degiiiiiig or year	1	Ziia oi yeai
	2	Savings and temporary cash investments				9,373,624	2	8,864,786
	3	Pledges and grants receivable, net				3,244,548	3	3,324,463
	4	Accounts receivable, net				52,606,967	4	50,343,338
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	employees,	and			
	6	Schedule L		4958(f)(1)) and		5	
		Schedule L					6	
Assets	7	Notes and loans receivable, net				3,111,070	7	3,087,653
88	8	Inventories for sale or use				13,178,944	8	12,209,596
⋖	9	Prepaid expenses and deferred charges				2,739,275	9	2,484,598
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	65,6	72,315			
	ь	Less accumulated depreciation	10b	30,1	65,132	36,721,169	10c	35,507,183
	11	Investments—publicly traded securities				33,133,504	11	26,199,333
	12	Investments—other securities See Part IV, line 11				4,602,761	12	2,374,284
	13	Investments—program-related See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11				5,069,338	15	5,431,147
	16	Total assets. Add lines 1 through 15 (must equal line 34)				163,781,200	16	149,826,381
	17	Accounts payable and accrued expenses .				59,163,137	17	71,413,466
	18	Grants payable			18			
	19	Deferred revenue		28,336,891	19	25,769,095		
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability Complete Part IV of Schedu.	le D .				21	
abilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		•				
æ		persons Complete Part II of Schedule L					22	
	23	Secured mortgages and notes payable to unrelated third parties				45,335,166	23	38,973,890
	24	Unsecured notes and loans payable to unrelated third parties					24	
	25	Other liabilities (including federal income tax, payables to relat and other liabilities not included on lines 17-24) Complete Par D				6,795,712	25	8,006,174
	26	Total liabilities. Add lines 17 through 25				139,630,906	-	144,162,625
ر م	20	Organizations that follow SFAS 117, check here ► ✓ and comp through 29, and lines 33 and 34.	olete I	nes 27		135,555,555	20	111,102,020
ğ	27	Unrestricted net assets				-6,423,671	27	-25,746,844
Balances	28	Temporarily restricted net assets				6,253,866	<u> </u>	5,377,714
<u> </u>	29	Permanently restricted net assets				24,320,099		26,032,886
Fund	-	Organizations that do not follow SFAS 117, check here ▶ □ a	nd com	nlete		2-1,020,039		20,002,000
Ī		lines 30 through 34.	ia con	hiere				
5 O.	30	Capital stock or trust principal, or current funds					30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund					31	
88	32	Retained earnings, endowment, accumulated income, or other fu		- -			32	
Net /	33	Total net assets or fund balances				24,150,294	33	5,663,756
ž	34	Total liabilities and net assets/fund balances				163,781,200		149,826,381
		. otaapintios and not assets/fund balances i i i i i				100,701,200	_ 	1-0,020,001

- (-)	Check if Schedule O contains a response to any question in this Part XI			.┏	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2186	83,530
2	Total expenses (must equal Part IX, column (A), line 25)	2			71,589
3	Revenue less expenses Subtract line 2 from line 1	3		-12,0	88,059
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		24,1	.50,294
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-6,3	398,479
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		5,6	63,756
Par	The triangle of the contains a response to any question in this Part XII			୮	
		r		Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

Software ID: 11000218
Software Version: 2011.0.0

EIN: 53-0116130

Name: NATIONAL RIFLE ASSOCIATION OF AMERICA

Form 990, Special Condition Description:

Special Condition Description

Compensated Employees, and		ent C			ors					
(A) Name and Title	(B) Average hours		that		y)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	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
WAYNE LAPIERRE CEO AND EXECUTIVE VP	57 00			x				831,709	0	140,291
CHRIS W COX EXEC DIRECTOR, ILA	57 00			х				583,304	0	80,881
WILSON H PHILLIPS JR TREASURER	52 00			х				514,322	0	135,757
KAYNE B ROBINSON EXEC DIRECTOR, GENERAL OPERATIONS	50 00			х				540,238	0	53,650
EDWARD J LAND JR SECRETARY	50 00			×				408,689	0	49,611
DAVID A KEENE PRESIDENT	20 00	Х		х				0	0	0
JAMES W PORTER II 1ST VICE PRESIDENT	20 00	Х		x				0	0	0
ALLAN D CORS 2ND VICE PRESIDENT	20 00	Х		х				0	0	0
TYLER SCHROPP EXEC DIRECTOR, ADVANCEMENT	52 00					Х		407,843	0	59,726
MARY CORRIGAN CHIEF OF STAFF	40 00					Х		733,810	0	24,103
JOSEPH GRAHAM DIRECTOR, PUBLICATIONS	40 00					Х		301,962	0	44,401
MICHAEL MARCELLIN MANAGING DIRECTOR	40 00					Х		391,642	0	56,135
RANDY KOZUCH DIRECTOR, ADVANCEMENT	40 00					Х		388,849	0	32,749
JOE M ALLBAUGH DIRECTOR	1 00	Х						0	0	0
WILLIAM H ALLEN DIRECTOR	1 00	Х						0	0	0
THOMAS P ARVAS DIRECTOR	1 00	Х						0	0	0
SCOTT L BACH DIRECTOR	1 00	Х						0	0	0
WILLIAM A BACHENBERG DIRECTOR	1 00	Х						0	0	0
FE BACHHUBER JR DIRECTOR	1 00	Х						0	0	0
M CAROL BAMBERRY DIRECTOR	1 00	Х						0	0	0
BOB BARR DIRECTOR	1 00	Х						0	0	0
RONNIE G BARRETT DIRECTOR	1 00	Х						0	0	0
CLEL BAUDLER DIRECTOR	1 00	Х						0	0	0
DAVID E BENNETT III DIRECTOR	1 00	Х						0	0	0
J KENNETH BLACKWELL DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per	Posi t	tion (that a		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	l wook	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
MATT BLUNT DIRECTOR	1 00	Х						0	0	0	
DAN BOREN DIRECTOR	1 00	Х						0	0	0	
ROBERT K BROWN DIRECTOR	1 00	Х						0	0	0	
PETE BROWNELL DIRECTOR	1 00	Х						0	0	0	
JOHN P BURTT DIRECTOR	1 00	Х						0	0	0	
DAVID BUTZ DIRECTOR	1 00	Х						150,000	0	0	
J WILLIAM CARTER DIRECTOR	1 00	Х						0	0	0	
TED W CARTER DIRECTOR	1 00	Х						0	0	0	
RICHARD CHILDRESS DIRECTOR	1 00	Х						0	0	0	
PATRICIA A CLARK DIRECTOR	1 00	Х						0	0	0	
CHARLES L COTTON DIRECTOR	1 00	Х						0	0	0	
DAVID G COY DIRECTOR	1 00	Х						0	0	0	
LARRY E CRAIG DIRECTOR	1 00	Х						0	0	0	
JOHN L CUSHMAN DIRECTOR	1 00	Х						0	0	0	
WILLIAM H DAILEY DIRECTOR	1 00	Х						0	0	0	
JOSEPH P DEBERGALIS JR DIRECTOR	1 00	Х						0	0	0	
R LEE ERMEY DIRECTOR	1 00	Х						0	0	0	
MANUEL FERNANDEZ DIRECTOR	1 00	Х						0	0	0	
EDIE P FLEEMAN DIRECTOR	1 00	Х						0	0	0	
JOEL FRIEDMAN DIRECTOR	1 00	Х						0	0	0	
SANDRA S FROMAN DIRECTOR	1 00	Х						45,180	0	0	
TOM GAINES DIRECTOR	1 00	Х						0	0	0	
JAMES S GILMORE III DIRECTOR	1 00	Х						0	0	0	
MARION P HAMMER DIRECTOR	1 00	Х						72,000	0	0	
GRAHAM HILL DIRECTOR	1 00	Х						0	0	0	

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion (/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
STEVE HORNADY	1 00	Х						0	0	0	
DIRECTOR SUSAN HOWARD DIRECTOR	1 00	Х						0	0	0	
ROY INNIS DIRECTOR	1 00	Х						0	0	0	
H JOAQUIN JACKSON DIRECTOR	1 00	Х						0	0	0	
CURTIS S JENKINS DIRECTOR	1 00	Х						0	0	0	
D CYNTHIA JULIEN DIRECTOR	1 00	Х						0	0	0	
TOM KING DIRECTOR	1 00	Х						0	0	0	
HERBERT A LANFORD JR DIRECTOR	1 00	Х						0	0	0	
KARL A MALONE DIRECTOR CAROLYN D MEADOWS	1 00	Х						0	0	0	
DIRECTOR JOHN F MILIUS	1 00							0		0	
DIRECTOR BILL MILLER	1 00							0		0	
DIRECTOR OWEN P MILLS	100							0		0	
DIRECTOR CLETA MITCHELL	1 00							0	_		
DIRECTOR GROVER G NORQUIST DIRECTOR	1 00							0	0	0	
OLIVER L NORTH DIRECTOR	1 00	Х						0	0	0	
JOHNNY NUGENT DIRECTOR	1 00	Х						0	0	0	
TED NUGENT DIRECTOR	1 00	Х						0	0	0	
LANCE OLSON DIRECTOR	1 00	Х						90,000	0	0	
PETER J PRINTZ DIRECTOR	1 00	Х						0	0	0	
TODD J RATHNER DIRECTOR WAYNE ANTHONY ROSS	1 00	Х						0	0	0	
DIRECTOR CARL T ROWAN JR	1 00							0			
DIRECTOR DON SABA	1 00							0			
DIRECTOR ROBERT E SANDERS	1 00							0		0	
DIRECTOR	1 00	X						0	0	0	

compensated Employees, and Independent confidences											
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Отпо	Key employee	Highest compensated	Former	rrom the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
RONALD L SCHMEITS DIRECTOR	1 00	Х						0	0	0	
TOM SELLECK DIRECTOR	1 00	Х						0	0	0	
JOHN C SIGLER DIRECTOR	1 00	Х						0	0	0	
LEROY SISCO DIRECTOR	1 00	Х						0	0	0	
DWIGHT D VAN HORN DIRECTOR	1 00	Х						0	0	0	
ROBERT L VIDEN JR DIRECTOR	1 00	Х						0	0	0	
HAROLD VOLKMER DIRECTOR	1 00	Х						0	0	0	
LINDA L WALKER DIRECTOR	1 00	Х						0	0	0	
HOWARD J WALTER DIRECTOR	1 00	Х						0	0	0	
JD WILLIAMS DIRECTOR	1 00	Х						0	0	0	
DENNIS L WILLING DIRECTOR	1 00	Х						0	0	0	
ROBERT J WOS DIRECTOR	1 00	Х						0	0	0	
DONALD E YOUNG DIRECTOR	1 00	Х						0	0	0	

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DLN: 93493311011202

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part TV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

tema	l Revenue Service		orm 990. ► See separat			Inspect	ion
	me of the organiz				Employer identifica	ation numbe	er
ΝAΙ	FIONAL RIFLE ASSOCI	ATION OF AMERICA			53-0116130		
Pa		zations Maintaining Donor Adation answered "Yes" to Form 99		ther Similar Fu		. Complet	e if the
			(a) Donor adv	ısed funds	(b) Funds and	other accou	nts
1	Total number at	end of year					
2	Aggregate contr	ributions to (during year)					
3		ts from (during year)					
4	Aggregate value	e at end of year					
5	_	ation inform all donors and donor advi ganization's property, subject to the	_		or advised	┌ Yes	┌ No
6	used only for ch	ation inform all grantees, donors, and naritable purposes and not for the ben rmissible private benefit				┌ Yes	┌ No
Pa	rt III Conser	vation Easements. Complete	ıf the organızatıon a	nswered "Yes" to	Form 990, Part I	/, line 7.	
1 2	Preservation Preservation	onservation easements held by the o on of land for public use (e g , recreati of natural habitat on of open space 2a-2d if the organization held a qual	on or pleasure)	Preservation of an Preservation of a c	historically importan ertified historic struction	-	a
		e last day of the tax year	med conservation con		1		
	Total number of			-		End of the	Year
a		conservation easements		_	2a		
b	_	estricted by conservation easements ervation easements on a certified his		d in (a)	2b 2c		
c d		ervation easements included in (c) a		-	2d		
u 3		ervation easements modified, transfe		Luchad ar tarminata		during	
3		r 🕨	erreu, reieaseu, extiligu	nsned, or terminate	u by the organization	during	
	•						
4		es where property subject to conserva					
5		zation have a written policy regarding the conservation easements it holds		ng, inspection, hand	lling of violations, and	☐ Yes	┌ No
6	Staff and volunt	eer hours devoted to monitoring, insp	pecting and enforcing c	onservation easem	ents during the year	<u> </u>	
7	A mount of expe ► \$	nses incurred in monitoring, inspecti	ng, and enforcing cons	ervation easements	during the year		
8	Does each cons	Gervation easement reported on line 2 and 170(h)(4)(B)(ii)?	2(d) above satisfy the r	equirements of sec	tion	┌ Yes	┌ No
9	balance sheet, at the organization	scribe how the organization reports c and include, if applicable, the text of t n's accounting for conservation easer	the footnote to the orga				
Par	TEIII Organi Comple	zations Maintaining Collection to the organization answered '	ons of Art, Historic "Yes" to Form 990, F	c al Treasures, c Part IV, line 8.	or Other Similar	Assets.	
1a	If the organizati art, historical tr	ion elected, as permitted under SFAS reasures, or other similar assets held XIV, the text of the footnote to its fir	116, not to report in it for public exhibition, e	ts revenue stateme ducation or researc	h in furtherance of pu		2,
b	historical treas	ion elected, as permitted under SFAS ures, or other similar assets held for owing amounts relating to these items	public exhibition, educa				
	(i) Revenues in	icluded in Form 990, Part VIII, line 1			► \$		
	(ii) Assets inclu	uded in Form 990, Part X			► \$		
2		ion received or held works of art, hist its required to be reported under SFA			r financial gain, provi	de the	

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Par	TITE Organizations Maintaining Co	llections of Art	<u>, His</u>	torical Tr	easures, or C	<u> the</u>	<u>r Similar Ass</u>	ets (continu	ed)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne following t	hat are a signific	ant u	se of its collectio	n	
а	▼ Public exhibition		d	┌ Loan d	or exchange prog	rams			
b	Scholarly research		e	┌ Other					
c	▼ Preservation for future generations								
4	Provide a description of the organization's co	ollections and expla	ın hov	w they furthe	r the organizatioi	n's ex	kempt purpose in		
5	During the year, did the organization solicity assets to be sold to raise funds rather than t							Yes	0
Par	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar	ements. Comple	ete ıf	the organi	zation answere		es" to Form 99	0,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ian or other interme	ediary	for contribu	tions or other ass	sets	not	Yes	0
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng table	Г				
_	_				-		Amo	unt	—
C	Beginning balance				-	1c			—
d	Additions during the year				-	1d			_
e	Distributions during the year				-	1e			—
f	Ending balance				L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?				Г	Yes	0
b	If "Yes," explain the arrangement in Part XI\								
Pa	rt V Endowment Funds. Complete							-)	
1.	Reginning of year balance	(a)Current Year 9,711,011	(D)Prior Year 8,687,890	(c)Two Years Back 6,920,6	 -	7,675,316	e) Four Years B	эск
1a L	Beginning of year balance	1,546,181		808,137	, ,	_	487,022		—
b	Contributions	-112,646		549,205		_	-1,205,479		—
С	Investment earnings or losses	-112,646		549,205	730,0.	29	-1,203,479		—
d	Grants or scholarships	279 110		304,201	536,9	20			—
е	Other expenditures for facilities and programs	378,110		304,201	330,91	30			
f	Administrative expenses	28,288		30,020	27,90	06	36,243		_
g	End of year balance	10,738,148		9,711,011	8,687,89	90	6,920,616		_
2	Provide the estimated percentage of the yea	r end balance held a	as			'			_
а	Board designated or quasi-endowment 🕨								
ь	Permanent endowment - 100 000 %								
С	Term endowment ►								
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	ation	that are held	and administere	d for	the	Yes No	-
	(i) unrelated organizations						3a(i)		-
	(ii) related organizations						3a(ii)		-
b	If "Yes" to 3a(II), are the related organization						3b	Yes	-
4	Describe in Part XIV the intended uses of th	e organization's end	dowm	ent funds					-
Par	rt VI Land, Buildings, and Equipme	nt. See Form 99	0, Pa	rt X, line 1	0.				_
	Description of property			(a) Cost or obasis (investr			(c) Accumulated depreciation	(d) Book valu	ıe
1a	Land				4,902	2,450		4,902,	
b	Buildings				48,50	-	20,928,876	28,204,	
	Leasehold improvements				,			· ,	_
	Equipment				12,268	3,575	9,958,630	2,400,	—— 361
	Other				,		, , , = =	, -,	_
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colur	nn (B)), line 10(c).)			►	35,507,	183
	• • • • • • • • • • • • • • • • • • • •	·					Schedule D (

Part VII Investments—Other Securities. See F	orm 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value		od of valuation f-year market value
(1)Financial derivatives	2,374,284		F
(2)Closely-held equity interests	2,374,204		<u>'</u>
Other			
o their			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	2,374,284		
Part VIII Investments—Program Related. See	Form 990, Part X, line :		
(a) Description of investment type	(b) Book value		od of valuation f-year market value
		Cost of end o	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line	e 15.		
(a) Descript	tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15			
Part X Other Liabilities. See Form 990, Part X,			
	(b) A mount		
	(b) Amount		
Federal Income Taxes			
DERIVATIVE INSTRUMENT MARKET VALUATION	6,390,476		
OTHER MISCELLANEOUS LIABILITIES	865,698		
ACCRUED SALES AND USE TAXES	750,000		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	8,006,174		

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	<u>nts</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	218,983,530
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	231,071,589
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-12,088,059
4	Net unrealized gains (losses) on investments	4	-4,481,648
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,916,831
9	Total adjustments (net) Add lines 4 - 8	9	-6,398,479
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-18,486,538
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	220,348,856
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-6,398,479
3	Subtract line 2e from line 1	3	226,747,335
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4 c	-7,763,805
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	218,983,530
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	238,835,394
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	<u> </u>	
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	7,819,805
3	Subtract line 2e from line 1	3	231,015,589
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b 56,000	1	
c	Add lines 4a and 4b	4c	56,000
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	231,071,589
Par	t XIV Supplemental Information		

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any

additional information		
Identifier	Return Reference	Explanation
III	1 a	THE FINANCIAL STATEMENTS OF THE NRA STATE THAT THE VALUE OF THE NRAS FIREARMS MUSEUM COLLECTION HAS BEEN EXCLUDED FROM THE STATEMENTS OF FINANCIAL POSITION ONLY PURCHASES OF FIREARMS AND OTHER OBJECTS, AND NOT DONATIONS, ARE RECOGNIZED IN THE STATEMENTS OF ACTIVITIES FIREARMS AND OTHER OBJECTS THAT HAVE BEEN ACCESSIONED IN THE NRA MUSEUM ARE NOT INTENDED FOR SALE OR EXCHANGE
111	4	THE NATIONAL FIREARMS MUSEUM PROMOTES GUN COLLECTING AND PRESERVATION OF HISTORY THROUGH THE HERITAGE OF FIREARMS PLEASE VISIT NRAMUSEUM ORG FOR EXCITING CURRENT INFORMATION ON THE MUSEUM GALLERIES
III	4	NRA ENDOWMENT FUNDS BENEFIT NRA INSTITUTE FOR LEGISLATIVE ACTION, NATIONAL CHAMPIONSHIPS, MARKSMANSHIP, AND LAW ENFORCEMENT
x	2	THE CONSOLIDATED FINANCIAL STATEMENTS OF THE NRA AND AFFILIATES STATE THAT MANAGEMENT EVALUATED THE NRAS 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 GENERALLY, THE NRA IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U S FEDERAL, STATE, OR LOCAL AUTHORITIES FOR YEARS BEFORE 2008, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOKBACK PERIOD
XI	8	INCLUDES AGENCY TRANSACTIONS AND UNREALIZED GAIN ON DERIVATIVE INSTRUMENT
XII	2 d	INCLUDES AGENCY TRANSACTIONS AND UNREALIZED GAIN ON DERIVATIVE INSTRUMENT
XII	4 b	INCLUDES COST OF GOODS SOLD, RENTAL EXPENSE, AND INTEREST ON ENDOWMENT GRANTS
XIII	2 d	INCLUDES COST OF GOODS SOLD, RENTAL EXPENSE, AND ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLAN
XIII	4 b	INCLUDES INTEREST ON ENDOWMENT GRANTS

DLN: 93493311011202

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

Name of the	organi	zatıon				
NATIONAL	RIFLE	ASSO	CIATION	ΟF	AMERI	CA

Employer identification number

					53-0116130	
Pa	"Yes" to Form 990, Pa			he United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the assistance, the grantees' eligible the grants or assistance?	organization r gibility for the	maintain record grants or assis	stance, and the selecti	on criteria used to awa	
2	For grantmakers. Describe in Pa United States	art V the organiz	zatıon's proceduı	res for monitoring the use	e of grant funds outside th	ne
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	Central America and the Caribbean			INVESTMENTS		4,000,000
	Central America and the Caribbean			PROGRAM SERVICES	LAW ENFORCE TRAINING	25,000
	Sub-total					4,025,000
ŀ	Total from continuation sheets to Part I					

c Totals (add lines 3a and 3b)

4,025,000

Part	Part IV, lı	ne 15, for any	sistance to Organ recipient who rece space is needed.	izations or Entiti ived more than \$5,	es Outside the Un 000. Check this box	nited States. Composite of the composite	olete if the organiza received more than	tion answered "Yes' 1 \$5,000	' to Form 990, ▶ 厂
	a) Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
•									
•									
•									
2	Enter total num ax-exempt by	nber of recipie the IRS, or fo	ent organizations list or which the grantee	ted above that are e or counsel has pro	recognized as chari ovided a section 50:	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . 🕨	
3	Enter total num	nber of other	organizations or ent	ities					(Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Part V if additional space is needed.

(a) Type of grant or (b) Region (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of

	(h) Degree		(d) A mount of	(a) Mannay of sach	(6) A mount of	(a) December	(h) Mathadas
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
				_		_	
						_	
						Cahad	ule F (Form 990) 2011

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 (see instructions for Form 926)	Γ	Yes	굣	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Г	Yes	굣	Νo
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)	Г	Yes	[ত	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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	<u> ~</u>	Yes	Г	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)	Г	Yes	া	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 file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ন	Νo

Schedule F (Form 990) 2011

Identifier	provide the information (see instructions) ReturnReference	Explanation
		·

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DLN: 93493311011202

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number

53-0116130

						33 0110130				
Pa	rt I	Fundraising Activities. Complete if the organ	zat	ion	answered "Yes" to Form S	990, Part IV, l	ine 17	·.		
1 a		cate whether the organization raised funds through any of Mail solicitations	the e	follo	wing activities Check all that Solicitation of non-governm					
c	<u>\rac{1}{2}</u>	Internet and e-mail solicitations Phone solicitations In-person solicitations	f g		Solicitation of government g Special fundraising events	jrants				
2a		the organization have a written or oral agreement with any ey employees listed in Form 990, Part VII) or entity in co			• •	•	┍	Yes	Г	No
b		es," list the ten highest paid individuals or entities (fundra e compensated at least \$5.000 by the organization Form		, ,	3			s		

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Dıd fundraıser have custody or control of contributions?		fundraiser have custody or control of		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
-		Yes	No									
INFOCISION 325 SPRINGSIDE DR AKRON, OH 44333	PAID SOLICITOR		No	9,871,841	5,613,068	4 ,2 58 ,7 7 3						
MEMBER CONNECT 4805 PEARL RD CLEVELAND, OH 44109	PAID SOLICITOR		No	772,079	513,193	258,886						
012112111111111111111111111111111111111												
			•	10,643,920	6,126,261	4,517,659						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

			(a) Event #1 ILA PITTSBURGH	(b) Event #2	(c) O ther Events	(d) Total Events (Add col (a) through col (c))
			(event type)	(event type)	(total number)	(0)
<u>₽</u>	1	Gross receipts	461,95	ι		461,951
Kevelkie	2	Less Charitable contributions				
	3	Gross income (line 1 minus line 2)	461,95	L		461,951
	4	Cash prizes				
,	5	Non-cash prizes				
201001	6	Rent/facility costs				
	7	Food and beverages				
3	8	Entertainment				
ا أ	9	Other direct expenses .	104,760			104,760
	10	Direct expense summary Add lin	ies 4 through 9 in columr	n (d)	🛌	(104,760
	11	Net income summary Combine Ii	nes 3 and 10 ın column ((d)		357,191
ar	: 1111	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
)			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through
						col (c))
D.A.D.	1	Gross revenue				col (c))
		Gross revenue				col (c))
	2					col (c))
200000	2	Cash prizes				col (c))
	2 3 4	Cash prizes				col (c))
	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs	Г Yes	☐ Yes	☐ Yes	col (c))
	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	□ No	□ No	Г No	col (c))
200000	2 3 4 5 6	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line	No	Г No	厂 No	((col (c))
-	2 3 4 5 6	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com	No s 2 through 5 in column in the state of t	Г No (d)	厂 No	
o a consider	2 3 4 5 6 7 8 Enter Is the	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line	No s 2 through 5 in column of the second sec	T No (d)	Г No	
a	2 3 4 5 6 7 8 Enter Is til If "N	Cash prizes	No s 2 through 5 in column of the second sec	Mo (d)	厂 No	(Yes \(\tag{No} \)

a Is the organization required under state law to make charitable distributions from the gaming proceeds to

in the organization's own exempt activities during the tax year 🕨 💲

Part IV Complete this part to provide additional information for responses to quuestion on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
I	Z D- I	READER NOTE 990 PART VII SECTION B TOTAL COMPENSATION TO INDEPENDENT CONTRACTOR VENDOR INFOCISION SHOULD NOT BE EXPECTED TO TIE TO SCHEDULE G DISCLOSURE OF COMPENSATION TO INFOCISION AS A PAID FUND RAISING SOLICITOR, BECAUSE 990 PART VII SECTION B REPORTS TOTAL COMPENSATION FOR ALL WORK INCLUDING BOTH MEMBERSHIP PROCESSING AND SOLICITATION OF CONTRIBUTIONS, WHEREAS SCHEDULE G DISCLOSES VENDOR COMPENSATION SPECIFICALLY FOR SOLICITATION OF CONTRIBUTIONS

Tyes TNo

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493311011202 OMB No 1545-0047

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

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

Open to Public **Inspection**

Employer identification number Name of the organization NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of (c) IRC Code section (d) A mount of cash **(b)** EIN (f) Method of (g) Description of (h) Purpose of grant (e) A mount of nonıf applıcable valuation non-cash assistance or assistance organization grant cash (book, FMV, appraisal, or government assistance other) (1) NATIONAL FND FOR 52-1480785 501c3 36,000 SCHOLARSHIPS WOMEN LEGISLATORS910 16TH ST NW WASHINGTON, DC 20006 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Part III	Grants and Other Assistance to Individuals in the United States.	Complete if the organization	n answered "Y	es" to Form 990,	Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.				

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) UNDERGRADUATE SCHOLARSHIPS	23	56,000			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
I	2	NRA ACTIVELY ASSISTS NATIONAL FOUNDATION OF WOMEN LEGISLATORS IN THE SELECTION AND ADMINISTRATION OF NFWL SCHOLARSHIPS

Schedule I (Form 990) 2011

DLN: 93493311011202

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization NATIONAL RIFLE ASSOCIATION OF AMERICA **Employer identification number**

53-0116130

Pa	rt I Questions Regarding Compensation					
					Yes	Νo
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org reimbursement orprovision of all the expenses descri			1b	Yes	
2	Did the organization require substantiation prior to re officers, directors, trustees, and the CEO/Executive I		- · · · · · · · · · · · · · · · · · · ·	2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that		y			
	Compensation committee	 	Written employment contract			
	✓ Independent compensation consultant Form 990 of other organizations	<u>र</u>	Compensation survey or study Approval by the board or compensation committee			
	Form 990 of other organizations	Į.	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Por a related organization	art VI	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	aymer	nt?	4a		Νo
b	Participate in, or receive payment from, a supplement	tal non	qualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pro-	vide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t com	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, li compensation contingent on the revenues of	ne 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, li compensation contingent on the net earnings of	ne 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7		No
8	Were any amounts reported in Form 990, Part VII, pasubject to the initial contract exception described in in Part III			8		No
9	If "Yes" to line 8, did the organization also follow the	rebutt	able presumption procedure described in Regulations			
	section 53 4958-6(c)?	3-		9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not 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, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) WAYNE LAPIERRE	(I) (II)	673,605	127,534	30,570	97,774	42,517	972,000		
(2) CHRIS W COX	(I) (II)	476,946	87,378	18,981	43,379	37,501	664,185		
(3) WILSON H PHILLIPS JR	(ı) (ıı)	401,146	88,070	25,106	109,007	26,750	650,079		
(4) KAYNE B ROBINSON	(ı) (ıı)	417,825	84,679	37,734	18,130	35,520	593,888		
(5) EDWARD J LAND JR	(I) (II)	357,604	43,298	7,787	18,130	31,481	458,300		
(6) TYLER SCHROPP	(I) (II)	363,626	40,998	3,219	14,605	45,121	467,569		
(7) MARY CORRIGAN	(I) (II)	324,416		409,394	18,130	5,973	757,913	30,28	
(8) JOSEPH GRAHAM	(I) (II)	228,604	50,000	23,358	18,130	26,271	346,363		
(9) MICHAEL MARCELLIN	(I) (II)	148,954	223,812	18,876	18,130	38,005	447,777		
(10) RANDY KOZUCH	(I) (II)	266,883	120,000	1,966	18,130	14,619	421,598		

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
I	1a	CHARTER TRAVEL WAS USED ON OCCASIONS INVOLVING MULTIPLE EVENTS WHEN REDUCED AIRLINE SCHEDULES PRECLUDED OTHER OPTIONS THIS WAS PROPERLY EXCLUDED FROM TAXABLE COMPENSATION
I	1a	CERTAIN COMPENSATION ELEMENTS WERE GROSSED UP ALL TAX GROSS-UPS WERE PROPERLY INCLUDED IN TAXABLE COMPENSATION
I	1a	CLUBS, SUCH AS SAFARI CLUB AND LUNCHEON CLUB, ARE USED FOR BUSINESS PURPOSES THIS WAS PROPERLY EXCLUDED FROM TAXABLE COMPENSATION
I	4b	THE 457F SERVICE COST INCLUDED IN DEFERRED COMPENSATION FOR WAYNE LAPIERRE WAS 79,644, FOR CHRIS W COX WAS 25,306, AND FOR WILSON H PHILLIPS JR WAS 90,877 THE NRA DECIDES THE BENEFIT AMOUNT AND TIMEFRAME FOR VESTING FOR EACH PARTICIPANT THE 457F PLAN IS ALSO DESIGNED TO SUPPLEMENT THE CURRENT DEFINED BENEFIT PLAN WHERE CURRENT BENEFIT LAW CAUSES LOW REPLACEMENT RATIOS FOR SOME PARTICIPANTS
II		COLUMN BIII OTHER REPORTABLE COMPENSATION IN TAXABLE WAGES INCLUDES 457B, AUTO, AND LIFE BENEFITS IN ADDITION, FOR MARY CORRIGAN IT INCLUDES VESTING AND ONE-TIME DISTRIBUTION OF DEFERRED COMPENSATION AS REQUIRED BY REGULATIONS
II		COLUMN C INCLUDES THE EMPLOYER-PAID PORTIONS OF THE NRA DEFINED BENEFIT PLAN, 401K PLAN, AND 457F PLAN
II		990 PART VII, SECTION A, TAKES A FULL TRANSPARENCY POSTURE BY DISREGARDING THE 10,000 PER ITEM EXCEPTION FOR CERTAIN BENEFIT REPORTING THEREFORE, TOTAL COMPENSATION AND BENEFITS IN PART VII, FORM 990 MATCH TOTALS AS PRESENTED ON SCHEDULE J, PART II

Schedule J (Form 990) 2011

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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Name of the organization	Employer identification number	
NATIONAL RIFLE ASSOCIATION OF AMERICA		
	53-0116130	

Identifier	Return Reference	Explanation
Form 990 Part I	7	READER NOTE REGARDING NATIONAL RIFLE ASSOCIATIONS UNRELATED BUSINESS INCOME FORM 990 PAGE 1 SHOWS GROSS UNRELATED BUSINESS REVENUE ON LINE 7A AND NET UNRELATED BUSINESS REVENUE ON LINE 7B THE NET IS LESS THAN ZERO BECAUSE RELATED EXPENSES EXCEEDED REVENUE IN 2011 THE MAIN SOURCES OF NRAS UNRELATED BUSINESS INCOME ARE MERCHANDISE SALES AND PERIODICALS ADVERTISING 990 READER NOTES ARE INTENDED AS A SERVICE TO HELP INTERESTED PARTIES UNDERSTAND THE ORGANIZATION

ldentifier	Return Reference	Explanation
Form 990 Part VI	6	THE NATIONAL RIFLE ASSOCIATION IS A MEMBERSHIP ASSOCIATION THAT REPRESENTS INDIVIDUAL CITIZENS REFER TO NRA BY LAWS FOR MEMBERSHIP ELIGIBILITY

Identifier	Return Reference	Explanation
Form 990 Part VI	7a	NRA MEMBERS ELECT ALL 76 MEMBERS OF NRA BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
Form 990 Part VI		CERTAIN BOARD DECISIONS ARE SUBJECT TO MEMBERSHIP APPROVAL, PURSUANT TO NRA BYLAWS AND NEW YORK NOT-FOR-PROFIT CORPORATE LAW

ldentifier	Return Reference	Explanation
Form 990 Part VI		FORM 990 IS REVIEWED BY EXTERNAL AUDITING FIRM AND THE NRA BOARD AUDIT COMMITTEE BEFORE IT IS FILED WITH THE IRS

Identifier	Return Reference	Explanation
Form 990 Part VI	19	NRA BY LAWS, AUDITED CONSOLIDATED ANNUAL FINANCIAL STATEMENTS OF THE NRA AND ITS AFFILIATES, AND ANNUAL REPORTS ARE MAILED UPON REQUEST NRA DOES NOT MAKE INTERNAL OPERATING POLICIES AVAILABLE TO THE GENERAL PUBLIC

Identifier	Return Reference	Explanation
Form 990 Part VI	12c	THE ORGANIZATION TAKES CONFLICTS OF INTEREST VERY SERIOUSLY AND UTILIZES A STATEMENT OF CORPORATE ETHICS TO MONITOR AND ENFORCE COMPLIANCE WITH CORPORATE POLICIES, ANNUAL FILINGS MUST BE PROVIDED TO NRA OFFICE OF THE SECRETARY AND REVIEWED REGULARLY AND CONSISTENTLY

Identifier	Return Reference	Explanation
Form 990 Part VI	15	THE PROCESSES TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIALS UTILIZE A COMPENSATION COMMITTEE, INDEPENDENT COMPENSATION CONSULTANTS, COMPENSATION SURVEYS AND STUDIES, COMPARABILITY DATA, AND ULTIMATE APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE

ldentifier	Return Reference	Explanation
Form 990 Part VI		OFFICERS OF THE NRA ALSO SPEND TIME SERVING ON BOARDS OF THE NRA CHARITABLE AFFILIATES AS DISCLOSED IN THE FOLLOWING LIST NRA PRESIDENT DAVID KEENE SPENDS 1 ADDITIONAL HOUR ON NRA FOUNDATION NRA FIRST VICE PRESIDENT JIM PORTER SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION, AND NRA SPECIAL CONTRIBUTION FUND NRA SECOND VICE PRESIDENT ALLAN CORS SPENDS 1 ADDITIONAL HOUR ON NRA FOUNDATION WAYNE LAPIERRE SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA FREEDOM ACTION FOUNDATION WILSON H PHILLIPS JR SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION, NRA SPECIAL CONTRIBUTION FUND, AND NRA FREEDOM ACTION KAYNE ROBINSON SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA SPECIAL CONTRIBUTION FUND

Identifier	Return Reference	Explanation
Form 990 Part VII		OTHER MEMBERS OF THE NRA BOARD OF DIRECTORS ALSO SPEND TIME ON BOARDS OF CHARITABLE AFFILIATES AS FOLLOWS, AT APPROXIMATELY 1 ADDITIONAL HOUR PER WEEK PER BOARD MEMBER JOE ALLBAUGH ON NRA FOUNDATION THOMAS ARVAS ON NRA SPECIAL CONTRIBUTION FUND BILL BACHENBERG ON NRA FOUNDATION CAROL BAMBERY ON NRA CIVIL RIGHTS DEFENSE FUND AND NRA SPECIAL CONTRIBUTION FUND DAVID BENNETT ON NRA SPECIAL CONTRIBUTION FUND BILL CARTER ON NRA SPECIAL CONTRIBUTION FUND CHARLES COTTON ON NRA CIVIL RIGHTS DEFENSE FUND BOB COTTROL ON NRA CIVIL RIGHTS DEFENSE FUND JOHN CUSHMAN ON NRA SPECIAL CONTRIBUTION FUND BILL DAILEY ON NRA CIVIL RIGHTS DEFENSE FUND AND NRA SPECIAL CONTRIBUTION FUND SANDY FROMAN ON NRA FOUNDATION BUZ MILLS ON NRA FOUNDATION CLETA MITCHELL ON NRA SPECIAL CONTRIBUTION FUND AND NRA FOUNDATION

ldentifier	Return Reference	Explanation
Form 990 Part VII		CONTINUED FROM ABOVE LINE BOB VIDEN ON NRA SPECIAL CONTRIBUTION FUND, AND HAROLD VOLKMER ON NRA CIVIL RIGHTS DEFENSE FUND

ldentifier	Return Reference	Explanation
Form 990 Part VII		READER NOTE 990 PART VII SECTION B TOTAL COMPENSATION TO INDEPENDENT CONTRACTOR VENDOR INFOCISION SHOULD NOT BE EXPECTED TO TIE TO SCHEDULE G DISCLOSURE OF COMPENSATION TO INFOCISION AS A PAID FUND RAISING SOLICITOR, BECAUSE 990 PART VII SECTION B REPORTS TOTAL COMPENSATION FOR ALL WORK INCLUDING BOTH MEMBERSHIP PROCESSING AND SOLICITATION OF CONTRIBUTIONS, WHEREAS SCHEDULE G DISCLOSES VENDOR COMPENSATION SPECIFICALLY FOR SOLICITATION OF CONTRIBUTIONS 990 READER NOTES ARE INTENDED AS A SERVICE TO HELP INTERESTED PARTIES UNDERSTAND THE ORGANIZATION

ldentifier	Return Reference	Explanation
Form 990 Part X		READER NOTE REGARDING THE NRA BALANCE SHEET DEFERRED COSTS AND DEFERRED REVENUES RELATED TO MEMBERSHIP ACQUISITION AND RENEWAL ARE ACCOUNTING ENTRIES REQUIRED UNDER GENERALLY ACCEPTED ACCOUNTING PRINCIPLES DEFERRED REVENUE FOR DUES IS NOT A LIABILITY, AS IT RECOGNIZES REVENUE TO BE COLLECTED IN FUTURE AND MATCHED WITH FUTURE SERVICES PROVIDED TO NRA MEMBERS DUES REVENUE IS RECOGNIZED OVER THE LIFE OF THE MEMBERSHIP 990 READER NOTES ARE INTENDED AS A SERVICE TO HELP INTERESTED PARTIES UNDERSTAND THE ORGANIZATION

Identifier	Return Reference	Explanation
Form 990		READER NOTE FOR ENHANCED TRANSPARENCY OF THE NRAS COMPLETE CORPORATE STRUCTURE THE NRA IS A 501C4 MEMBERSHIP ASSOCIATION WITH FOUR 501C3 CHARITABLE SUBSIDIARIES AND A SECTION 527 POLITICAL ACTION COMMITTEE THAT IS A SEPARATE SEGREGATED FUND THE NRAS FOUR CHARITIES ARE NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION INC, NRA FREEDOM ACTION FOUNDATION, AND NRA SPECIAL CONTRIBUTION FUND DBA NRA WHITTINGTON CENTER, AND THE NRAS PAC IS NRA POLITICAL VICTORY FUND 990 READER NOTES ARE INTENDED AS A SERVICE TO HELP INTERESTED PARTIES UNDERSTAND THE ORGANIZATION

ldentifier	Return Reference	Explanation
Form 990 Part XI	5	RECONCILIATION INCLUDES ADJUSTMENT FOR AGENCY TRANSACTION, UNREALIZED GAINSLOSSES ON INVESTMENTS, AND UNREALIZED GAIN ON DERIVATIVE INSTRUMENT

ldentifier	Return Reference	Explanation
Form 990 Part III Program Service Accomplishments	Line 4d Other Activities	Program Service Expenses 78,289,244, Grants and allocations 0, Revenue 103,042,849 990 PART III LINE 4d OTHER PROGRAM SERVICES THAT SERVE THE NRAS PRIMARY EXEMPT PURPOSES, IN ADDITION TO CATEGORIES AND ACHIEVEMENTS LISTED ON THE 990 CORE FORM, INCLUDE PUBLIC AFFAIRS, EXECUTIVE OFFICES, NRA OFFICE OF ADVANCEMENT, AND MORE VISIT NRANEWS COM AND NRAGIVE COM FOR THE LATEST NEWS AND OPPORTUNITIES TO ENGAGE WITH THE NRA

Identifier	Return	Explanation
	Reference	·
		FORM 990, Part III, Line 4d Program Service Expenses 78, 289, 244, Grants and allocations 0, Revenue 103, 042, 849 990 PART III LINE 4d CITHER PROGRAM SERVICES THAT SERVE THE NAS RRIMA RY EXEMPT PLRFOSES, IN ADDITION TO CATEGORES AND ACHEVE DEA ADVANCEMENT, AND MORE VISIT NA ANEWS COM AND NRAGIVE COM FOR THE LATEST NEWS AND OPPOPUTATIONS OF DISAGREWINF THE PARPA FOR my 900 Part Line 7 FEADER NOTE. RESARDING NATIONAL RELE ASSOCIATIONS LINRELATED BUSINESS INCOME FORM 990 PAGE 1 SHOWS GROSS UNFEL ATED BUSINESS REVENUE ON LINE 7A AND NET UNRELATED BUSINESS REVENUE ON LINE 73. THE NET IS LESS THAN ZERO BECAUSE RELATED EXPENSES EXCEPTED PROVIDED 11 THE MAIN SOURCES OF NRAS UNFELATED BUSINESS NCOME ARE MERCHANDISE SALES AND PRIDOCALS ADVERTISING 990 Part VI Section A Line 6 THE NATIONAL RIFL E ASSOCIATION IS A MEMBERSH PASSOCIATION THAT REPRESENTS INDIVIDUAL CITIZENS REFER TO NRA BY LAWS FOR MEMBERSH PLASSICIATION THAT REPRESENTS INDIVIDUAL CITIZENS REFER TO NRA BY LAWS FOR MEMBERSH PLEIGHTY Form 990 Part VI Section A Line 7a NRA MEMBERS ELECT ALL 76 MEMBERS OF NRA BOARD OF DIRECTORS Form 990 Part VI Section A Line 7b CERTAIN BOARD DECISIONS ARE SUBJECT TO MEMBERSHIP PARPOVALE, INCREMINATION THAT REPRESENTS INDIVIDUAL CITIZENS REFER TO NRA BY LAWS FOR MEMBERSHIP ELIGIBILITY Form 990 Part VI Section A Line 7b CERTAIN BOARD DECISIONS ARE SUBJECT TO MEMBERSHIP PARPOVALE, INCREMINATION THAN BY LAWS AND NEW YORK NOT-FOR PROPIT CORPORATE LAW Form 990 Part VI Section B Line 11b FORM 990 IS REVENED BY STETRIAL A LAUDITING FRIM AND THE NRA BOARD AUDIT COMMITTEE BEFORE IT IS FILED WITH THE RES FORM 99 OR AND A SECTION OF THE NATIONAL PROPING AND A SECTION

ldentifier	Return Reference	Explanation
		QUISITION AND RENEWAL ARE ACCOUNTING ENTRIES REQUIRED UNDER GENERALLY ACCEPTED ACCOUNTING PRINCIPLES DEFERRED REVENUE FOR DUES IS NOT A LIABILITY, AS IT RECOGNIZES REVENUE TO BE C OLLECTED IN FUTURE AND MATCHED WITH FUTURE SERVICES PROVIDED TO NRA MEMBERS DUES REVENUE IS RECOGNIZED OVER THE LIFE OF THE MEMBERSHIP 990 READER NOTES ARE INTENDED AS A SERVICE TO HELP INTERESTED PARTIES UNDERSTAND THE ORGANIZATION FORM 990 READER NOTE FOR ENHANCED TRANSPARENCY OF THE NRAS COMPLETE CORPORATE STRUCTURE THE NRA IS A 501C4 MEMBERSHIP ASSOCIATION WITH FOUR 501C3 CHARITABLE SUBSIDIARIES AND A SECTION 527 POLITICAL ACTION COMMITTEE THAT IS A SEPARATE SEGREGATED FUND THE NRAS FOUR CHARITIES ARE NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION INC, NRA FREEDOM ACTION FOUNDATION, AND NRA SPECIAL CONTRIBUTION FUND DBA NRA WHITTINGTON CENTER, AND THE NRAS PAC IS NRA POLITICAL VICTORY FUND 990 READER NO TES ARE INTENDED AS A SERVICE TO HELP INTERESTED PARTIES UNDERSTAND THE ORGANIZATION FORM 990 Part XI Line 5 RECONCILIATION INCLUDES ADJUSTMENT FOR AGENCY TRANSACTION, UNREALIZED GAINSLOSSES ON INVESTMENTS, AND UNREALIZED GAIN ON DERIVATIVE INSTRUMENT

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

DLN: 93493311011202

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2011

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Schedule R (Form 990) 2011

Employer identification number

Department of the Treasury Internal Revenue Service

ATIONAL RIFLE ASSOCIATION OF AMERICA					53-01161	130			
Part I Identification of Disregarded Entities (Com	plete	ıf the organizatio	on answered "Yes"	' on Form 990, P	art IV, line 33.)				
(a) Name, address, and EIN of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during			ıf the organization	answered "Yes"	on Form 990, I	Part	IV, line 34 becaus	se it had	one
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity sta (if section 501(c))	tus (3))	(f) Direct controlling entity	Section 5 cont organ	rolled nization
1) NRA FOUNDATION INC								Yes	No
.1250 WAPLES MILL RD FAIRFAX, VA 22030 52-1710886	CHAR	ITABLE	DC	501c3	Ц	NE 7	NRA	Yes	
2) NRA SPECIAL CONTRIBUTION FUND PO BOX 700 RATON, NM 87740 P3-7367534	CHAR	ITABLE	NM	501c3	LINE 11-TY	PE I	NRA	Yes	
3) NRA CIVIL RIGHTS DEFENSE FUND .1250 WAPLES MILL RD .1250 WAPLES MILL RD .221136665	CHAR	ITABLE	VA	501c3	ш	NE 7	NRA	Yes	
4) NRA FREEDOM ACTION FOUNDATION 1250 WAPLES MILL RD AIRFAX, VA 22030 16-1277941	CHAR	ITABLE	VA	501c3	Ш	NE 7	NRA	Yes	

Cat No 50135Y

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign 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

(5) NRA SPECIAL CONTRIBUTION FUND

(6) NRA CIVIL RIGHTS DEFENSE FUND

Pa	art V	Transactions With Related Organizations (Complete if the organization answer	ered "Yes" on Form 99	0, Part IV, line 34, 35	5, 35A, or 36.)					
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No		
1 [ouring th	ne tax year, did the orgranization engage in any of the following transactions with one or more rela	ated organizations listed	ın Parts II-IV?						
а	Recei	pt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity				1a	Yes			
b	Gıft, g	rant, or capital contribution to related organization(s)				1b		No		
c	Gıft, g	rant, or capital contribution from related organization(s)				1 c	Yes			
d	Loans	or loan guarantees to or for related organization(s)				1d		No		
е	Loans	or loan guarantees by related organization(s)				1e		No		
f	Saleo	of assets to related organization(s)				1f		No		
g		ase of assets from related organization(s)				1g		No		
h		ange of assets with related organization(s)				1h		No		
i		of facilities, equipment, or other assets to related organization(s)				1i		No		
•	Lease	or identices, equipment, or other assets to related organization(s)								
j	Lease	of facilities, equipment, or other assets from related organization(s)				1j		No		
k	Perfor	rmance of services or membership or fundraising solicitations for related organization(s)				1k		No		
Performance of services or membership or fundraising solicitations by related organization(s)						11		No		
n	n Sharır	ng of facilities, equipment, mailing lists, or other assets with related organization(s)				1m		No		
n	Sharır	ng of paid employees with related organization(s)				1n	Yes			
o	Reimb	oursement paid to related organization(s) for expenses				1o		No		
р	Reimb	pursement paid by related organization(s) for expenses				1р	Yes			
a	Other	transfer of cash or property to related organization(s)				1q		No		
r		transfer of cash or property from related organization(s)				1r		No		
-										
2	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including covere	d relationships and trans	action thresholds					
		(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determinin		ount inv	olved		
(1)	NRA FOUN	DATION INC	С	11,752,195	CASH					
(2) 1	NRA FOUN	DATION INC	n	3,848,000	CASH					
(3)	NRA FOUN	DATION INC	р	4,783,767	67 CASH					
(4) N	4) NRA SPECIAL CONTRIBUTION FUND a 120,000 CASH									

р

p

659,026

54,794

CASH

CASH

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 sections 512- 514)		(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	nare of end-of-year		(h) Dispropitionate allocations?		Gene man	j) eral or aging tner?	(k) Percentage ownership
			311/	Yes	No			Yes	No		Yes	No	ĺ
												<u> </u>	

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Identifi	r Return Reference	Explanation
V		ALL GRANTS MADE BY THE NRA FOUNDATION TO NATIONAL RIFLE ASSOCIATION ARE SUBJECT TO A STRINGENT REVIEW PROCESS REQUIRING THAT THEY BE MADE AND USED ONLY FOR QUALIFIED CHARITABLE PURPOSE PROGRAMS

Schedule R (Form 990) 2011

Software ID: 11000218

Software Version: 2011.0.0

EIN: 53-0116130

Name: NATIONAL RIFLE ASSOCIATION OF AMERICA

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1)	NRA FOUNDATION INC	С	11,752,195	CASH
(2)	NRA FOUNDATION INC	n	3,848,000	CASH
(3)	NRA FOUNDATION INC	р	4,783,767	CASH
(4)	NRA SPECIAL CONTRIBUTION FUND	а	120,000	CASH
(5)	NRA SPECIAL CONTRIBUTION FUND	р	659,026	CASH
(6)	NRA CIVIL RIGHTS DEFENSE FUND	р	54,794	CASH