

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

TO PROTECT AND DEFEND THE U S CONSTITUTION

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 41,409,374 including grants of \$) (Revenue \$ 28,248,562)

NRA MEMBERSHIP COMMUNICATIONS ARE DAILY, WEEKLY, AND MONTHLY NEWS UPDATES AND TRENCHANT INSIGHTS THROUGH AN AWARD WINNING ARRAY OF DIGITAL AND HARDCOPY MATERIALS AND THE MOST AUTHORITATIVE COVERAGE FROM RECOGNIZED LEADERS AND SUBJECT MATTER EXPERTS NRA MEDIA VEHICLES SERVE TO EDUCATE, INFORM, AND REINFORCE THE NRAS PRIMARY EXEMPT PURPOSES AND OBJECTIVES FOR ACCESS TO NRAS CONTINUALLY UPDATED PRESENCE SUCH AS THE NRA OFFICIAL JOURNALS, PLEASE VISIT NRANEWS DOT COM AND NRAPUBLICATIONS DOT ORG, AND RENEW OR UPGRADE YOUR NRA MEMBERSHIP AT NRA DOT ORG

4b

(Code) (Expenses \$ 34,063,015 including grants of \$ 84,033) (Revenue \$ 27,275,405)

NRA GENERAL OPERATIONS PROGRAM SERVICES ARE WORLD-CLASS PROGRAMS INCLUDING NRA SPORTS, COMPETITIONS AND MATCHES, EDDIE EAGLE GUNSAFE, FIREARM TRAINING, HUNTER SERVICES, LAW ENFORCEMENT SERVICES, RANGE SERVICES, WOMENS PROGRAMS, YOUTH PROGRAMS, FRIENDS OF NRA, NRA MUSEUMS, AND MORE EDUCATION, SAFETY, AND TRAINING ARE THE CORE OF THE NRA MISSION NRA CONTINUES TO BE THE GLOBAL LEADER AND GO-TO RESOURCE IN FIREARMS EDUCATION, SAFETY, AND TRAINING PLEASE VISIT PROGRAMS DOT NRA DOT ORG AND GO DOT NRA DOT ORG

4c

(Code) (Expenses \$ 27,618,525 including grants of \$) (Revenue \$)

NRA-ILA LEGISLATIVE PROGRAM SERVICES AS THE FOREMOST PROTECTOR AND DEFENDER OF THE U S CONSTITUTION, THE NATIONAL RIFLE ASSOCIATION ADVOCATES AGAINST EFFORTS TO ERODE THE SECOND AMENDMENT, FIGHTS FOR INITIATIVES AIMED AT REDUCING VIOLENT CRIME, AND PROMOTES HUNTERS RIGHTS AND CONSERVATION EFFORTS NATIONWIDE NRA LEGISLATIVE ACTION INVOLVES FIREARMS RIGHTS, REGULATIONS AND LAWS, RANGE PROTECTION, INTERNATIONAL GUN CONTROL THREATS, WORKERS PROTECTION, SELF-DEFENSE, FREE SPEECH RIGHTS, AND A HOST OF RELATED MATTERS PLEASE VISIT NRAILA DOT ORG FOR THE LATEST UPDATES AND ENGAGE WITH ILA ON SOCIAL MEDIA

4d

Other program services (Describe in Schedule O)












(Expenses \$ 126,490,866 including grants of \$) (Revenue \$ 175,975,054)

4e

Total program service expenses ▶

229,581,780

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2	Yes
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	Yes
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	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 and XII 	12a	Yes
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	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, Parts I and IV 	14b	Yes
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	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 hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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 "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1,257	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.	785	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		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.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	Yes	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	76	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	72	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	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 taxable entity during the year?	16a	No
16b	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 , AK
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, 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

Check if Schedule O contains a response or note to any line in this Part VII ☒

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

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

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

[illegible]

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	7,500,290		595,046

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 67

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
INFOCISION 325 SPRINGSIDE DR AKRON OH 44333	MEMBERSHIP PROCESSING AND SOLICITOR	25,359,095
ACKERMAN MCQUEEN 1601 NW EXPRESSWAY STE 1100 OKLAHOMA CITY OK 73118	PUBLIC RELATIONS AND ADVERTISING	14,466,985
POSTMASTER 1735 N LYNN ST ARLINGTON VA 22209	POSTAGE SHIPPING	9,902,396
PALM COAST DATA 11 COMMERCE BLVD PALM COAST FL 32164	MEMBERSHIP PROCESSING	7,965,280
MEMBERSHIP MARKETING PARTNERS 11250 WAPLES MILL RD STE 310 FAIRFAX VA 22030	FUNDRAISING PRINTING AND MAILING	7,726,773

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►82

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c				
	d	Related organizations 1d	13,044,170			
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	83,356,202			
	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f	96,400,372			
Program Service Revenue	Business Code					
	2a	PROGRAM FEES	7,896,324	7,896,324		
	b	MEMBER DUES	175,577,863	175,577,863		
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	183,474,187			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	1,476,905			1,476,905
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties	16,359,604			16,359,604
	6a	(i) Real				
		(ii) Personal				
		Gross rents	952,294			
		b Less rental expenses	1,389,363			
	c	Rental income or (loss)	-437,069			
	d	Net rental income or (loss)	-437,069			-437,069
	7a	(i) Securities				
		(ii) Other				
		Gross amount from sales of assets other than inventory	10,651,418			
		b Less cost or other basis and sales expenses	8,463,960			
	c	Gain or (loss)	2,187,458			
	d	Net gain or (loss)	2,187,458			2,187,458
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18				
		a	733,661			
	b	Less direct expenses b	251,163			
	c	Net income or (loss) from fundraising events	482,498			482,498
	9a	Gross income from gaming activities See Part IV, line 19				
		a				
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances				
		a	29,601,441			
	b	Less cost of goods sold b	10,222,360			
	c	Net income or (loss) from sales of inventory	19,379,081	16,233,717	3,145,364	
	Miscellaneous Revenue		Business Code			
	11a	ADVERTISING	541800	24,468,824	24,468,824	
	b	SUBSCRIPTIONS	541800	3,664,477	3,664,477	
	c	NRA CAFE SALES	722210	397,191		397,191
	d	All other revenue		115,261	3,150	112,111
	e	Total. Add lines 11a-11d	28,645,753			
	12	Total revenue. See Instructions	347,968,789	203,375,531	27,614,188	20,578,698

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	20,112	20,112		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	63,921	63,921		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	5,157,474	1,975,715	2,968,553	213,206
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.	34,628,053	25,970,916	6,451,155	2,205,982
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	8,418,497	5,270,580	2,637,994	509,923
9	Other employee benefits.	4,997,436	3,497,265	1,197,467	302,704
10	Payroll taxes.	2,797,659	1,957,836	670,365	169,458
11	Fees for services (non-employees):				
a	Management.	0			
b	Legal.	7,889,836	7,602,227	287,609	
c	Accounting.	130,525		130,525	
d	Lobbying.	0			
e	Professional fundraising services. See Part IV, line 17.	7,222,981			7,222,981
f	Investment management fees.	260,652		260,652	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	5,439,341	5,439,341		
12	Advertising and promotion.	47,531,085	40,099,686		7,431,399
13	Office expenses.	4,596,370	2,690,273	1,906,097	
14	Information technology.	9,458,596	5,634,486	3,824,110	
15	Royalties.	0			
16	Occupancy.	2,026,324	864,243	1,162,081	
17	Travel.	6,041,188	4,316,159	1,725,029	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	7,215,967	5,650,133	1,565,834	
20	Interest.	1,289,516	830,089	459,427	
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	2,342,325	1,754,355	587,970	
23	Insurance.	1,081,521	1,081,521		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O).				
a	MEMBER COMMUNICATIONS	66,168,963	48,936,691		17,232,272
b	PRINTING AND SHIPPING	28,279,410	28,279,410		
c	GENERAL OPERATIONS PROGRAM SERVICES	27,366,223	27,366,223		
d	BANKING FEES	5,363,614	587,481	3,578,636	1,197,497
e	All other expenses	4,762,768	9,693,117	-7,229,524	2,299,175
25	Total functional expenses. Add lines 1 through 24e.	290,550,357	229,581,780	22,183,980	38,784,597
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

☒

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			10,747,947	2	18,589,464
	3	Pledges and grants receivable, net			2,601,438	3	4,754,673
	4	Accounts receivable, net			51,240,665	4	53,885,272
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			3,064,403	7	3,042,736
	8	Inventories for sale or use			11,799,972	8	18,784,686
	9	Prepaid expenses and deferred charges			3,109,155	9	4,223,274
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	69,661,793	34,324,673	10c	35,869,048
	b	Less—accumulated depreciation	10b	33,792,745			
	11	Investments—publicly traded securities			29,895,485	11	77,381,866
	12	Investments—other securities. See Part IV, line 11			7,951,222	12	6,627,475
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			5,762,576	15	6,309,546
	16	Total assets. Add lines 1 through 15 (must equal line 34)			160,497,536	16	229,468,040
Liabilities	17	Accounts payable and accrued expenses			78,683,405	17	67,471,453
	18	Grants payable				18	
	19	Deferred revenue			30,985,830	19	47,701,178
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			31,104,089	23	33,478,339
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			8,502,822	25	5,908,992
	26	Total liabilities. Add lines 17 through 25			149,276,146	26	154,559,962
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			-21,588,667	27	34,813,419
	28	Temporarily restricted net assets			5,097,033	28	8,903,939
	29	Permanently restricted net assets			27,713,024	29	31,190,720
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			11,221,390	33	74,908,078
	34	Total liabilities and net assets/fund balances			160,497,536	34	229,468,040

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	347,968,789
2	Total expenses (must equal Part IX, column (A), line 25)	2	290,550,357
3	Revenue less expenses Subtract line 2 from line 1	3	57,418,432
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,221,390
5	Net unrealized gains (losses) on investments	5	2,366,603
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,901,653
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	74,908,078

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?		
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID: 13000230
Software Version: 13.6.0.0
EIN: 53-0116130
Name: NATIONAL RIFLE ASSOCIATION OF AMERICA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES W PORTER II PRESIDENT	20 00 2 00	X		X				0	0	0
ALLAN D CORS 1ST VICE PRESIDENT	10 00 2 00	X		X				0	0	0
PETE BROWNELL 2ND VICE PRESIDENT	10 00	X		X				0	0	0
JOE M ALLBAUGH DIRECTOR	1 00 1 00	X						0	0	0
WILLIAM H ALLEN DIRECTOR	1 00	X						0	0	0
THOMAS P ARVAS DIRECTOR	1 00 1 00	X						0	0	0
SCOTT L BACH DIRECTOR	1 00	X						0	0	0
WILLIAM A BACHENBERG DIRECTOR	1 00 1 00	X						0	0	0
F E BACHHUBER JR DIRECTOR	1 00	X						0	0	0
M CAROL BAMBERY DIRECTOR	1 00 2 00	X						0	0	0
BOB BARR DIRECTOR	1 00	X						0	0	0
RONNIE G BARRETT DIRECTOR	1 00	X						0	0	0
CLEL BAUDLER DIRECTOR	1 00	X						0	0	0
DAVID E BENNETT DIRECTOR	1 00 1 00	X						0	0	0
J KENNETH BLACKWELL DIRECTOR	1 00	X						0	0	0
MATT BLUNT DIRECTOR	1 00	X						0	0	0
DAN BOREN DIRECTOR	1 00	X						0	0	0
ROBERT K BROWN DIRECTOR	1 00 1 00	X						0	0	0
DAVID BUTZ DIRECTOR	5 00 5 00	X						150,000	0	0
J WILLIAM CARTER DIRECTOR	1 00 1 00	X						0	0	0
TED W CARTER DIRECTOR	1 00	X						0	0	0
RICHARD CHILDRESS DIRECTOR	1 00	X						0	0	0
PATRICIA A CLARK DIRECTOR	1 00	X						0	0	0
CHARLES L COTTON DIRECTOR	1 00 1 00	X						0	0	0
DAVID G COY DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LARRY E CRAIG DIRECTOR	1 00	X						0	0	0
JOHN L CUSHMAN DIRECTOR	1 00	X						0	0	0
WILLIAM H DAILEY DIRECTOR	1 00	X						0	0	0
JOSEPH P DEBERGALIS JR DIRECTOR	1 00	X						0	0	0
R LEE ERMEY DIRECTOR	1 00	X						0	0	0
EDIE P FLEEMAN DIRECTOR	1 00	X						0	0	0
JOEL FRIEDMAN DIRECTOR	1 00	X						0	0	0
SANDRA S FROMAN DIRECTOR	5 00	X						45,180	0	0
TOM GAINES DIRECTOR	1 00	X						0	0	0
JAMES S GILMORE III DIRECTOR	1 00	X						0	0	0
MARION P HAMMER DIRECTOR	5 00	X						122,000	0	0
MARIA HEIL DIRECTOR	1 00	X						0	0	0
GRAHAM HILL DIRECTOR	1 00	X						0	0	0
STEVE HORNADY DIRECTOR	1 00	X						0	0	0
SUSAN HOWARD DIRECTOR	1 00	X						0	0	0
ROY INNIS DIRECTOR	1 00	X						0	0	0
H JOAQUIN JACKSON DIRECTOR	1 00	X						0	0	0
CURTIS S JENKINS DIRECTOR	1 00	X						0	0	0
DAVID A KEENE DIRECTOR	1 00	X						0	0	0
TOM KING DIRECTOR	1 00	X						0	0	0
HERBERT A LANFORD JR DIRECTOR	1 00	X						0	0	0
KARL A MALONE DIRECTOR	1 00	X						0	0	0
CAROLYN D MEADOWS DIRECTOR	1 00	X						0	0	0
JOHN F MILIUS DIRECTOR	1 00	X						0	0	0
BILL MILLER DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
OWEN BUZ MILLS DIRECTOR	1 00	X						0	0	0
CLETA MITCHELL THROUGH 05052013 DIRECTOR	1 00	X						0	0	0
GROVER G NORQUIST DIRECTOR	1 00	X						0	0	0
OLIVER L NORTH DIRECTOR	1 00	X						0	0	0
ROBERT NOSLER DIRECTOR	1 00	X						0	0	0
JOHNNY NUGENT DIRECTOR	1 00	X						0	0	0
TED NUGENT DIRECTOR	1 00	X						0	0	0
LANCE OLSON DIRECTOR	5 00	X						90,000	0	0
TIMOTHY W PAWOL DIRECTOR	1 00	X						0	0	0
PETER J PRINTZ DIRECTOR	1 00	X						0	0	0
TODD J RATHNER DIRECTOR	1 00	X						0	0	0
WAYNE ANTHONY ROSS DIRECTOR	1 00	X						0	0	0
CARL T ROWAN JR DIRECTOR	1 00	X						0	0	0
DON SABA DIRECTOR	1 00	X						0	0	0
ROBERT E SANDERS DIRECTOR	1 00	X						0	0	0
WILLIAM H SATTERFIELD DIRECTOR	1 00	X						0	0	0
RONALD L SCHMEITS DIRECTOR	1 00	X						0	0	0
STEVEN C SCHREINER DIRECTOR	1 00	X						0	0	0
TOM SELLECK DIRECTOR	1 00	X						0	0	0
JOHN C SIGLER DIRECTOR	1 00	X						0	0	0
LEROY SISCO DIRECTOR	1 00	X						0	0	0
DWIGHT D VAN HORN DIRECTOR	1 00	X						0	0	0
LINDA L WALKER DIRECTOR	1 00	X						0	0	0
HOWARD J WALTER DIRECTOR	1 00	X						0	0	0
J D WILLIAMS DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT J WOS DIRECTOR	1 00	X						0	0	0
DONALD E YOUNG DIRECTOR	1 00	X						0	0	0
WAYNE LAPIERRE CEO AND EXECUTIVE VP	60 00 2 00			X				834,786	0	149,396
WILSON H PHILLIPS JR TREASURER	50 00 5 00			X				2,827,976	0	41,635
CHRIS W COX EXEC DIR, ILA	58 00 2 00			X				734,770	0	93,886
EDWARD J LAND JR SECRETARY	40 00			X				409,994	0	52,920
ROBERT K WEAVER EXEC DIR, GENERAL OPS	50 00			X				392,164	0	60,492
TYLER SCHROPP EXEC DIR, ADVANCEMENT	52 00 5 00					X		495,075	0	58,709
DAVID LEHMAN DEPUTY EXEC DIR, ILA	50 00 1 00					X		390,781	0	19,022
ROBERT MARCARIO MANAGING DIRECTOR	50 00					X		363,743	0	56,545
JAMES BAKER DIRECTOR, ILA FEDERAL	50 00					X		323,439	0	12,669
MICHAEL MARCELLIN MANAGING DIRECTOR	40 00					X		320,382	0	49,772

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b**

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

OMB No 1545-0047

2013

Open to Public Inspection

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

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)☐ Preservation of an historically important land area

☐ Protection of natural habitat☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ **Yes**☐ **No**

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ **Yes**☐ **No**

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a

☒ Public exhibition

d

☐ Loan or exchange programs

b

☒ Scholarly research

e

☐ Other

c

☒ Preservation for future generations
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- | | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- 2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☒ No
- b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	12,587,566	10,738,148	9,711,011	8,687,890	6,920,616
b Contributions	2,818,471	1,554,967	1,546,181	808,137	1,582,051
c Net investment earnings, gains, and losses	794,093	775,895	-112,646	549,205	750,029
d Grants or scholarships					
e Other expenditures for facilities and programs	461,526	442,581	378,110	304,201	536,900
f Administrative expenses	32,383	38,863	28,288	30,020	27,906
g End of year balance	15,706,221	12,587,566	10,738,148	9,711,011	8,687,890

- 2

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

Board designated or quasi-endowment

b

Permanent endowment 100 000 %

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

3a(i)

No

(ii) related organizations

3a(ii)

Yes

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes
- 4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,902,450		4,902,450
b Buildings		49,300,124	23,426,751	26,308,338
c Leasehold improvements				
d Equipment		15,459,219	13,063,456	4,658,260
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				35,869,048

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	365,784,847
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,366,603
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	3,901,653
e	Add lines 2a through 2d	2e	6,268,256
3	Subtract line 2e from line 1	3	359,516,591
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	-11,547,802
c	Add lines 4a and 4b	4c	-11,547,802
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	347,968,789

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	302,098,159
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	11,611,723
e	Add lines 2a through 2d	2e	11,611,723
3	Subtract line 2e from line 1	3	290,486,436
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	63,921
c	Add lines 4a and 4b	4c	63,921
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	290,550,357

Part XIII

Supplemental Information

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

Return Reference	Explanation
III 1a	THE VALUE OF THE NRA MUSEUM COLLECTIONS 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. THE FIREARMS AND OTHER OBJECTS IN THE NRA MUSEUMS ARE NOT INTENDED FOR SALE OR EXCHANGE AND ARE CONSIDERED TO BE OF SIGNIFICANCE FOR VARIOUS REASONS TO INCLUDE THE HISTORICAL SIGNIFICANCE, PREVIOUS OWNERS, AND CRAFTSMANSHIP.
III 4	THE NRA MUSEUMS PROMOTE GUN COLLECTING AND PRESERVATION OF HISTORY THROUGH THE HERITAGE OF FIREARMS. PLEASE VISIT NRAMUSEUM.ORG FOR EXCITING CURRENT INFORMATION ON THE MUSEUM GALLERIES IN FAIRFAX, VIRGINIA AND SPRINGFIELD, MISSOURI.
III 4	NRA ENDOWMENT FUNDS BENEFIT NRA INSTITUTE FOR LEGISLATIVE ACTION, NATIONAL CHAMPIONSHIPS, MARKSMANSHIP, AND LAW ENFORCEMENT.
X 2	MANAGEMENT EVALUATED THE NRA 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 TAX AUTHORITIES FOR YEARS BEFORE 2010, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOKBACK PERIOD.
XI 2d	INCLUDES AGENCY TRANSACTIONS AND UNREALIZED GAIN ON DERIVATIVE INSTRUMENT.
XI 4b	INCLUDES COST OF GOODS SOLD, RENTAL EXPENSE, ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLANS, INTEREST ON ENDOWMENT GRANTS.
XII 2d	INCLUDES COST OF GOODS SOLD, RENTAL EXPENSE, ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLAN.

[illegible]

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.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number
53-0116130

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(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 and investments in region
(1) Central America and the Caribbean			INVESTMENT ACCOUNT		4,225,000
(2) Europe			PROGRAM SERVICES	LAW ENFORCEMENT TRAINING	6,978
(3)					
(4)					
(5)					
3a Sub-total					4,231,978
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					4,231,978

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶
- 3 Enter total number of other organizations or entities ▶

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.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☒

Yes

☐

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐

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).*

☐

Yes

☒

No

Part V

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I Line 3	REFLECTS INDUSTRY STANDARD BEST PRACTICES IN RISK MANAGEMENT FOR LARGE NONPROFIT ORGANIZATIONS. ALTERNATIVE INVESTMENTS REDUCE OVERALL PORTFOLIO RISK BY IMPROVING DIVERSIFICATION. 990 READER NOTES ARE INCLUDED AS A CONVENIENCE TO HELP THE PUBLIC UNDERSTAND THE ORGANIZATION.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number
53-0116130

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒

Mail solicitations

e

☐

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☐

Solicitation of government grants

c

☒

Phone solicitations

g

☐

Special fundraising events

d

☐

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 ALLEGIANCE 11250 WAPLES MILL RD FAIRFAX, VA 22030	PAID SOLICITOR		No	31,708,814	480,000	31,228,814
2 INFOCISION 325 SPRINGSIDE DR AKRON, OH 44333	PAID SOLICITOR		No	11,252,555	6,742,981	4,509,574
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶				42,961,369	7,222,981	35,738,388

3

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

AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, 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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>NRA-ILA EVENT</u> (event type)	<u>(event type)</u>	<u>(total number)</u>	(add col (a) through col (c))
Revenue	1	Gross receipts	733,661		733,661
	2	Less Contributions . . .			
	3	Gross income (line 1 minus line 2)	733,661		733,661
Direct Expenses	4	Cash prizes			
	5	Noncash prizes . . .			
	6	Rent/facility costs . . .			
	7	Food and beverages .			
	8	Entertainment			
	9	Other direct expenses .	251,163		251,163
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Subtract line 10 from line 3, column (d) ▶			
					482,498

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<div><input type="checkbox"/> Yes.....%</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes.....%</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes.....%</div> <div><input type="checkbox"/> No</div>	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ **Yes** ☐ **No**

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

Return Reference	Explanation
------------------	-------------

OMB No 1545-0047

▶ Attach to Form 990

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

Open to Public Inspection

Employer identification number

53-0116130

☒ Yes ☐ No

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

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	▶	<u>1</u>
3	Enter total number of other organizations listed in the line 1 table	▶	

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) NRA JEANNE E BRAY MEMORIAL UNDERGRADUATE SCHOLARSHIPS	27	63,921			

Part IV

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

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

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number
53-0116130

Part I

Questions Regarding Compensation

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

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

For each individual whose compensation must be reported 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, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
Part I Line 1a	CERTAIN COMPENSATION ELEMENTS WERE GROSSED UP. ALL TAX GROSSUPS WERE PROPERLY INCLUDED IN TAXABLE COMPENSATION. CLUBS ARE USED FOR BUSINESS PURPOSES ONLY. THIS WAS PROPERLY EXCLUDED FROM TAXABLE COMPENSATION.
Part I Line 4b	THE 457F SERVICE COST INCLUDED IN DEFERRED COMPENSATION FOR WAYNE LAPIERRE WAS 90,334 AND FOR CHRIS W COX WAS 28,702, AS ACTUARIALLY CALCULATED UNDER ASC 715. THE NRA DECIDES THE BENEFIT AMOUNT AND TIMEFRAME FOR VESTING OF 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. DURING THE YEAR, TREASURER WILSON H PHILLIPS JR VESTED IN HIS 457F PLAN PARTICIPATION. SUCH AMOUNTS HAVE BEEN PROPERLY INCLUDED AS TAXABLE COMPENSATION AND REPORTED IN 990 PART VII AND SCHEDULE J PART II.
Part II	COLUMN Biii OTHER REPORTABLE COMPENSATION IN TAXABLE WAGES INCLUDES 457B, 457F VESTING AMOUNTS, AUTO, AND LIFE BENEFITS. COLUMN C INCLUDES THE EMPLOYER-PAID PORTIONS OF THE NRA DEFINED BENEFIT PLAN, 401K PLAN, AND 457F PLAN. NRA TAKES A FULL TRANSPARENCY POSTURE FOR EXECUTIVE COMPENSATION BY DISREGARDING THE 10,000 PER ITEM EXCEPTION.

Additional Data

Software ID: 13000230
Software Version: 13.6.0.0
EIN: 53-0116130
Name: NATIONAL RIFLE ASSOCIATION OF AMERICA

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
WAYNE LAPIERRE CEO AND EXECUTIVE VP	(i) (ii)	674,385	128,464	31,937	109,204	40,192	984,182	
WILSON H PHILLIPS JR TREASURER	(i) (ii)	402,297	81,456	2,344,223	18,870	22,765	2,869,611	428,345
CHRIS W COX EXEC DIR, ILA	(i) (ii)	629,149	85,628	19,993	47,572	46,314	828,656	
EDWARD J LAND JR SECRETARY	(i) (ii)	356,885	44,890	8,219	18,870	34,050	462,914	
ROBERT K WEAVER EXEC DIR, GENERAL OPS	(i) (ii)	388,449		3,715	18,301	42,191	452,656	
TYLER SCHROPP EXEC DIR, ADVANCEMENT	(i) (ii)	365,352	125,994	3,729	15,300	43,409	553,784	
DAVID LEHMAN DEPUTY EXEC DIR, ILA	(i) (ii)	318,846	30,000	41,935	14,908	4,114	409,803	
ROBERT MARCARIO MANAGING DIRECTOR	(i) (ii)	209,759	132,098	21,886	17,929	38,616	420,288	
JAMES BAKER DIRECTOR, ILA FEDERAL	(i) (ii)	294,558	25,000	3,881		12,669	336,108	
MICHAEL MARCELLIN MANAGING DIRECTOR	(i) (ii)	150,091	150,415	19,876	18,870	30,902	370,154	

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number

53-0116130

Return Reference	Explanation
Form 990, Part III, Line 4d	Program Service Expenses 126,490,866, Grants and allocations 0, Revenue 175,975,054 NRA PROGRAM SERVICES ARE IN THE KEY AREAS OF NRA MEMBERSHIP COMMUNICATIONS, NRA GENERAL OPERATIONS, AND NRA INSTITUTE FOR LEGISLATIVE ACTION IN ADDITION TO THESE CATEGORIES AS DESCRIBED IN THE 990 CORE FORM, OTHER VITAL PROGRAMS INCLUDE EXECUTIVE AND SPECIAL PROJECTS ALL NRA 990 READERS ARE ENCOURAGED TO EXPLORE NRA DOT ORG, NRANEWS DOT COM, AND NRAGIVE DOT COM FOR APPEALING AND INSPIRATIONAL OPPORTUNITIES TO CONTINUE TO ENGAGE WITH THE NRA AND PRESERVE THE SECOND AMENDMENT THROUGH EDUCATION, SAFETY, AND TRAINING PROGRAMS THANK YOU

Return Reference	Explanation
Form 990, Part I, Line 7	READER NOTE REGARDING NATIONAL RIFLE ASSOCIATION UNRELATED BUSINESS INCOME. FORM 990 PAGE 1 SHOWS GROSS UNRELATED BUSINESS REVENUE ON LINE 7A AND NET UNRELATED BUSINESS REVENUE ON LINE 7B. BY APPLYING NET OPERATING LOSS CARRY FORWARDS, THE NRA DID NOT OWE UBIT FOR THE 2013 YEAR. THE MAIN SOURCES OF NRA UNRELATED BUSINESS INCOME ARE MERCHANDISE SALES AND PERIODICAL ADVERTISING. 990 READER NOTES ARE INCLUDED AS A CONVENIENCE TO HELP THE PUBLIC UNDERSTAND THE ORGANIZATION.

Return Reference	Explanation
Form 990, Part VI, Section A, Line 6	THE NATIONAL RIFLE ASSOCIATION IS A MEMBERSHIP ASSOCIATION THAT REPRESENTS INDIVIDUAL CITIZENS REFER TO NRA BYLAWS FOR MEMBERSHIP ELIGIBILITY

Return Reference	Explanation
Form 990, Part VI, Section A, Line 7a	NRA MEMBERS ELECT ALL 76 MEMBERS OF THE NRA BOARD OF DIRECTORS

Return Reference	Explanation
Form 990, Part VI, Section A, Line 7b	CERTAIN BOARD DECISIONS ARE SUBJECT TO MEMBERSHIP APPROVAL PER NRA BYLAWS AND NEW YORK NOT FOR PROFIT CORPORATE LAW

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	FORM 990 IS REVIEWED BY EXTERNAL AUDITING FIRM AND THE NRA BOARD AUDIT COMMITTEE BEFORE IT IS FILED WITH THE IRS

Return Reference	Explanation
Form 990, Part VI, Section C, Line 19	NRA BYLAWS, AUDITED CONSOLIDATED FINANCIAL STATEMENTS OF THE NRA AND AFFILIATES, AND ANNUAL REPORTS ARE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6014d THE NRA DOES NOT MAKE INTERNAL OPERATING POLICIES AVAILABLE TO THE GENERAL PUBLIC

Return Reference	Explanation
Form 990, Part VI, Section B, Line 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

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	NRA 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. ALL DECISIONS ARE PROPERLY DOCUMENTED

Return Reference	Explanation
Form 990, Part VII, Section B, Line 1	READER NOTE 990 PART VII SECTION TOTAL COMPENSATION TO INDEPENDENT CONTRACTOR INFOCISION REPORTS COMPENSATION FOR ALL WORK INCLUDING BOTH MEMBERSHIP PROCESSING AND SOLICITATION OF CONTRIBUTIONS, WHILE SCHEDULE G DISCLOSES COMPENSATION SPECIFICALLY FOR SOLICITATION OF CONTRIBUTIONS NOT MEMBERSHIPS 990 READER NOTES ARE INCLUDED AS A CONVENIENCE TO HELP THE PUBLIC UNDERSTAND THE ORGANIZATION

Return Reference	Explanation
Form 990, Part X, Section B, Line 34	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 INCLUDED AS A CONVENIENCE TO HELP THE PUBLIC UNDERSTAND THE ORGANIZATION PLEASE LEARN MORE ABOUT NRA MEMBERSHIP LEVELS AT NRA DOT ORG

Return Reference	Explanation
Form 990, Part XI, Line 9	INCLUDES AGENCY TRANSACTIONS AND UNREALIZED GAIN ON DERIVATIVE INSTRUMENT

Return Reference	Explanation
Form 990, Part I, Line 1	READER NOTE FOR ENHANCED TRANSPARENCY OF THE NRA 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 FOUR CHARITIES ARE NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION INC, NRA FREEDOM ACTION FOUNDATION, AND NRA SPECIAL CONTRIBUTION FUND DBA WHITTINGTON CENTER. AND THE POLITICAL ACTION COMMITTEE IS NRA POLITICAL VICTORY FUND. 990 READER NOTES ARE INCLUDED AS A CONVENIENCE TO HELP THE PUBLIC UNDERSTAND THE ORGANIZATION. PLEASE CONTACT THE NRA IF YOU ARE INTERESTED IN ADDITIONAL EXPLANATIONS OF THE TECHNICAL ACCOUNTING AND TAX STANDARDS. THE NRA VALUES ITS REPUTATION FOR TRANSPARENCY AND ACCOUNTABILITY AND HAS EARNED INDUSTRY RECOGNITION FOR EXCELLENCE IN LEADERSHIP.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number
53-0116130

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) NRA FOUNDATION INC 11250 WAPLES MILL RD FAIRFAX, VA 22030 52-1710886	CHARITABLE	DC	501c3	LINE 7	NRA	Yes	
(2) NRA SPECIAL CONTRIBUTION FUND PO BOX 700 RATON, NM 87740 23-7367534	CHARITABLE	NM	501c3	LINE 7	NRA	Yes	
(3) NRA CIVIL RIGHTS DEFENSE FUND 11250 WAPLES MILL RD FAIRFAX, VA 22030 52-1136665	CHARITABLE	NY	501c3	LINE 7	NRA	Yes	
(4) NRA FREEDOM ACTION FOUNDATION 11250 WAPLES MILL RD FAIRFAX, VA 22030 26-1277941	CHARITABLE	VA	501c3	LINE 7	NRA	Yes	

Part III

Identification of Related Organizations Taxable as a Partnership

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

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

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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

Transactions With Related Organizations

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

Lease of facilities, equipment, or other assets to related organization(s)

k

Lease of facilities, equipment, or other assets from related organization(s)

l

Performance of services or membership or fundraising solicitations for related organization(s)

m

Performance of services or membership or fundraising solicitations by related organization(s)

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

Other transfer of cash or property to related organization(s)

s

Other transfer of cash or property from related organization(s)

Yes

No

1a

Yes

1b

No

1c

Yes

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

Yes

1p

No

1q

Yes

1r

No

1s

No

2

If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
See Additional Data Table			

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.

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
Part V Line 1	ALL GRANTS MADE BY THE NRA FOUNDATION AND NRA CIVIL RIGHTS DEFENSE FUND TO THE NRA ARE SUBJECT TO STRINGENT REVIEW PROCESSES REQUIRING THAT THEY BE MADE AND USED ONLY FOR QUALIFIED CHARITABLE PURPOSE PROGRAMS

Additional Data

Software ID: 13000230

Software Version: 13.6.0.0

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-s)	(c) Amount Involved	(d) Method of determining amount involved
NRA FOUNDATION INC	c	13,044,170	CASH VALUE
NRA FOUNDATION INC	o	5,369,792	CASH VALUE
NRA FOUNDATION INC	q	4,244,386	CASH VALUE
NRA SPECIAL CONTRIBUTION FUND	a	120,000	CASH VALUE
NRA SPECIAL CONTRIBUTION FUND	q	1,487,912	CASH VALUE
NRA CIVIL RIGHTS DEFENSE FUND	c	147,181	CASH VALUE
NRA CIVIL RIGHTS DEFENSE FUND	q	103,336	CASH VALUE