DLN: 93493270005081

Return of Organization Exempt From Income Tax

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

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Form **990**

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

Open to Public Inspection

A Fo	r the 2	2010 ca	lendar year, or tax year beginning 01-01-2010 and ending 12-31-2010				
B Che	eck if a	pplicable	C Name of organization NATIONAL RIFLE ASSOCIATION OF AMERICA	ployer id	entification number		
Add	Iress ch	nange		53-0116130			
┌ Nar	ne chai	nge		phone n	umber		
┌ Init	ıal retui	rn	Number and street (or P O box if mail is not delivered to street address) Room/suite (70	3)267-	1000		
┌ Ter	mınated	d	11250 WAPLES MILL ROAD				
┌ Am	ended i	return	City of town, state of country, and ZIP + 4	ss receipts	\$ \$ 253,051,952		
┌ App	lication	n pending	FAIRFAX, VA 220307400				
			F Name and address of principal officer H(a) Is this a group retu	6 6 51			
			WILSON H PHILLIPS JR	rn for affiliat	es/ Yes No		
			11250 WAPLES MILL RD FAIRFAX, VA 22030 H(b) Are all affiliates	ıncluded?	☐ Yes ☐ No		
			If "No," attac		(see instructions)		
I Ta	x-exem	npt status	501(c)(3)	ption nui	mber 🟲		
J W	ebsit e	e: ► www	w nra org				
		ganızatıon	✓ Corporation Trust Association Other ► L Year of formation	1905 M	State of legal domicile VA		
Pa	rt I	Sum	mary				
Governance	1 , (NATION AND PRO CONSTI ENFORC	TECT AND DEFEND THE US CONSTITUTION, TO PROMOTE PUBLIC SAFETY, LAW AN ALDEFENSE, TO TRAIN LAW ENFORCEMENT AGENCIES, TO TRAIN CIVILIANS IN MAD MOTE THE SHOOTING SPORTS, TO PROMOTE HUNTER SAFETY TO PROTECT AND IT TUTION TO PROMOTE PUBLIC SAFETY, LAW AND ORDER, AND THE NATIONAL DEFENDEMENT AGENCIES TO TRAIN CIVILIANS IN MARKSMANSHIP TO FOSTER AND PROMOTE HUNTER SAFETY	ARKSMA DEFEND NSE TO	NSHIP, TO FOSTER THE U S TRAIN LAW		
	-	Chack th	nis box 📭 if the organization discontinued its operations or disposed of more than 25% of it		n a ta		
Activities &			of voting members of the governing body (Part VI, line 1a)	.s net as			
豎			of voting members of the governing body (Part VI, line 1a)	4			
ਨੂ			mber of individuals employed in calendar year 2010 (Part V, line 2a)	5	781		
•			mber of volunteers (estimate if necessary)	6	125,000		
			related business revenue from Part VIII, column (C), line 12	7a	22,545,060		
			lated business taxable income from Form 990-T, line 34	7b	-480,264		
			Prior Year	<u>' </u>	Current Year		
	8	Contri	butions and grants (Part VIII, line 1h)	,182	71,145,801		
all I	9	Progra	m service revenue (Part VIII, line 2g)	3,381	107,083,801		
Ravenue	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)131	.,048	3,460,273		
Щ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 41,301	.,989	46,121,404		
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 237,544	1.504	227,811,279		
	13			2,500	219,500		
	14		ts paid to or for members (Part IX, column (A), line 4)	,	0		
	15		es, other compensation, employee benefits (Part IX, column (A), lines 5-				
8		10)	51,967	,645	51,666,650		
Expenses	16a		sional fundraising fees (Part IX, column (A), line 11e)	5,019	7,989,955		
巫	Ь		ndraising expenses (Part IX, column (D), line 25) • 33,912,021				
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		183,658,170		
	18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		243,534,275		
. 07	19	Reven	ue less expenses Subtract line 18 from line 12		-15,722,996		
Net Assets or Fund Balances			Beginning of Curr Year	ent	End of Year		
9 48	20	Total a	assets (Part X, line 16)	5,364	163,781,200		
A A	21		iabilities (Part X, line 26)	0,032	139,630,906		
žĪ	22	Net as	sets or fund balances Subtract line 21 from line 20	,332	24,150,294		
	t II	_	ature Block				
know		and belie	erjury, I declare that I have examined this return, including accompanying schedules and statement f, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inform				
			2011-09-26				
Sign		Signa	ture of officer Date				
Here	2		ON H PHILLIPS JR TREASURER AND CHIEF FINANCIAL OFFIC or print name and title				
		<u> ' ' </u>	Cheat fe	and I			
		Print/Type preparer's			PTIN		
Paid	- 1		me ▶ RSM MCGLADREY INC	-	Firm's EIN		
Prepa	- 1	Fırm's add	dress 8000 TOWERS CRESCENT DR STE 500	+	Phone no (703) 336-		
Use Only			VIENNA, VA 22184		6400		
_		<u> </u>	s this return with the preparer shown above? (see instructions)		▼Yes 「No		

Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
<u>TO P</u>	ROTECT 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?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 38,859,989 including grants of \$ 39,500) (Revenue \$ 18,297,536)
	EDUCATIONAL, COMPETITIVE, COMMUNITY SERVICE AND TRAINING PROGRAMS NRA PROVIDES A BROAD SPECTRUM OF HIGH QUALITY SERVICES TO TRAIN, INFORM AND INSTRUCT THE MEMBERSHIP AND GENERAL PUBLIC OF 80 MILLION GUNOWNERS WITH REGARD TO THEIR INALIENABLE SECOND AMENDMENT RIGHTS NRA CONTINUES TO BE THE PREMIER LEADER IN FIREARMS EDUCATION AND SAFETY NRA OUTREACH FOR YOUTH IN THE HUNTING AND SHOOTING SPORTS ALSO INCLUDES YOUTH SCHOLARSHIPS AND SHOOTING CAMPS TO BUILD AND FOSTER THE NEXT GENERATIONS IN AMERICA VISIT NRA ORG AND NRANEWS COM FOR MORE INFORMATION, AND PARTICIPATE IN NRA SOCIAL NETWORKING THROUGH FACEBOOK, TWITTER AND YOUTUBE
	(Code) (Expenses \$ 36,029,923 including grants of \$) (Revenue \$ 22,428,263)
-	NRA PUBLICATIONS THE PRIMARY MISSION IS TO PROVIDE MEMBERS WITH MONTHLY PRINT AND DIGITAL MAGAZINES CONTAINING THE MOST AUTHORITATIVE ARTICLES ON FIREARMS, HUNTING, LEGISLATIVE AND LEGAL ACTION FROM RECOGNIZED LEADERS ALL NRA MEDIA VEHICLES SERVE TO EDUCATE AND INFORM O NRAS PURPOSES AND OBJECTIVES FOR ACCESS TO NRAS EXPANDED MEDIA PRESENCE AND OFFICIAL JOURNALS, VISIT NRAPUBLICATIONS ORG
	(Code) (Expenses \$ 21,288,446 including grants of \$ 180,000) (Revenue \$)
	LEGISLATIVE ACTION AS THE FOREMOST PROTECTOR AND DEFENDER OF THE U.S. CONSTITUTION, NRA ADVOCATES AGAINST EFFORTS TO ERODE THE SECOND AMENDMENT, FIGHTS FOR INITIATIVES AIMED AT REDUCING VIOLENT CRIME, AND PROMOTES HUNTERS RIGHTS AND CONSERVATION EFFORTS NATIONWIDE NR 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 VISIT NRAILA ORG FOR THE LATEST UPDATES
	Other program services (Describe in Schedule O)
	(Expenses \$ 88,852,887 including grants of \$) (Revenue \$ 100,990,554)
4e	Total program service expenses►\$ 185,031,245

Part IV	Checklist	of Rea	uired	Sched	dules

			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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	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		Νo
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? 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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		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		Νo
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> 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 assistance to any organization or entity located outside the U S ? 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 assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV \cdot	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 hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νo
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	163	Νο
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

			V	A.
	Enter the number reported in Boy 2 of Form 1006. Enter 10 of Enter 10 of Enter 1006.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 872			
•	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
	1b 0			
2	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	Yes	
	gaming (gambling) winnings to prize winners?		162	
	Statements filed for the calendar year ending with or within the year covered by this			
	return	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	163	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
•	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	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)?	4a		N
_	,			IN
b	If "Yes," enter the name of the foreign country 🕨			
	See histractions for ming requirements for Form 1D F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N ·
5	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50		
_	Ti les to fine sa of su, and the organization the Form 6000-17	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	Yes	
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	were not tax deductible?	00	163	
_	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
a	services provided to the payor?	/a		
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
_	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
1	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
		†		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year Section 501(c)(29) qualified nonprofit health insurance issuers.	†		
	Is the organization licensed to issue qualified health plans in more than one state?			
a	Note. See the instructions for additional information the organization must report on Schedule O	13a		
L	Enter the amount of receives the organization is required to maintain by the state.			
ט	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]		
	13c			
а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N c
	If "Vee " has it filed a Form 720 to report these payments? If "Ne " provide an explanation in Schoolide O	146		

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.

	question in this Part VI					

_Se	ction 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		Νο
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		Νο
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? \cdot \cdot	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	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		Νo
	ction B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	103	No.
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
IIG	Thas the organization provided a copy of this form 990 to an intempers of its governing body before mining the form.	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does 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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►VA, UT, PA, OK, NY, KY, DC, CA,	4 L		

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 make these available. Check all that apply

Own website Another's website Vpon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours		(C) (D) Position (check all Reportable compensation from the						(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	highest compensated employee Key employee Officei Institutional Trustee or director		Highest compensated employee Key employee		Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
(1) WAYNE LAPIERRE EXEC VP	57 00			х				835,469	0	125,615
(2) CHRIS W COX EXEC DIR, ILA	57 00			х				588,412	0	70,796
(3) WILSON H PHILLIPS JR TREASURER	52 00			х				519,338	0	124,168
(4) KAYNE B ROBINSON EXEC DIR, GENERAL OPERATIONS	50 00			х				1,027,217	0	45,056
(5) EDWARD J LAND JR SECRETARY	50 00			х				412,527	0	45,832
(6) RONALD L SCHMEITS PRESIDENT	20 00	Х		х				0	0	0
(7) DAVID A KEENE 1ST VICE PRESIDENT	20 00	Х		х				0	0	0
(8) JAMES W PORTER II 2ND VICE PRESIDENT	20 00	Х		х				0	0	0
(9) TYLER SCHROPP EXEC DIRECTOR, ADVANCEMENT	52 00					х		442,476	0	54,463
(10) MARY CORRIGAN CHIEF OF STAFF	40 00					х		329,168	0	30,373
(11) JOSEPH GRAHAM DIRECTOR, PUBLICATIONS	40 00					х		352,474	0	40,832
(12) MICHAEL MARCELLIN MANAGING DIRECTOR	40 00					х		345,102	0	49,348
(13) ROBERT MARCARIO DIRECTOR, MEMBERSHIP	40 00					х		250,757	0	44,773
(14) JOE M ALLBAUGH DIRECTOR	1 00	Х						0	0	0
(15) WILLIAM H ALLEN DIRECTOR	1 00	х						0	0	0
(16) THOMAS P ARVAS DIRECTOR	1 00	Х						0	0	0

(A) Name and Title	(B) Average hours per		tion (/)		I	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of othe compensation
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization an related organizations
17) SCOTT L BACH IRECTOR	1 00	х						0	0	
18) WILLIAM A BACHENBERG IRECTOR 19) FE BACHHUBER JR	1 00	Х						0	0	
IRÉCTOR 20) M CAROL BAMBERRY	1 00	X						0	0	
VIRECTOR 21) BOB BARR VIRECTOR	1 00	X						0	0	
22) RONNIE G BARRETT DIRECTOR	1 00	Х						0	0	
23) CLEL BAUDLER NRECTOR 24) DAVID E BENNETT III	1 00	X						0	0	
DIRECTOR 25) J KENNETH BLACKWELL	1 00	X						0	0	
VIRECTOR 26) MATT BLUNT VIRECTOR	1 00	Х						0	0	
27) DAN BOREN DIRECTOR 28) ROBERT K BROWN	1 00	х						0	0	
28) ROBERT K BROWN DIRECTOR 29) PETE BROWNELL	1 00	X						0	0	
DIRECTOR 30) JOHN P BURTT DIRECTOR	1 00	X						0	0	
31) DAVID BUTZ DIRECTOR	1 00	х						151,033	0	
32) J WILLIAM CARTER IRECTOR 33) RICHARD CHILDRESS	1 00	х						0	0	
VIRÉCTOR 34) PATRICIA A CLARK	1 00	X						0	0	
DIRECTOR 35) ALLAN D CORS DIRECTOR	1 00	X						0	0	
36) CHARLES L COTTON DIRECTOR	1 00	Х						0	0	
37) DAVID G COY IRECTOR 38) LARRY E CRAIG	1 00	X						0	0	
IRÉCTOR 39) JOHN L CUSHMAN	1 00	×						0	0	
VIRECTOR 40) WILLIAM H DAILEY VIRECTOR	1 00	×						0	0	
41) JOSEPH P DEBERGALIS JR DIRECTOR	1 00	х						0	0	
42) DONN C DIBIASIO IRECTOR 43) MANUEL FERNANDEZ	1 00	X						0	0	
PIRÉCTOR 44) EDIE P FLEEMAN	1 00	X						0	0	
DIRECTOR 45) JOEL FRIEDMAN DIRECTOR	1 00	X						0	0	
46) SANDRA S FROMAN DIRECTOR	1 00	Х						45,180	0	
47) TOM GAINES NRECTOR 48) JAMES S GILMORE III	1 00	X						0	0	
PIRECTOR 49) MARION P HAMMER	1 00	X						190,000	0	
IRECTOR 50) GRAHAM HILL IRECTOR	1 00	Х						0	0	
51) STEVE HORNADY IRECTOR	1 00	х						0	0	
52) SUSAN HOWARD DIRECTOR 53) ROY INNIS	1 00	X						0	0	
VIRÉCTOR 54) H JOAQUIN JACKSON VIRECTOR	1 00	×						0	0	
55) CURTIS S JENKINS IRECTOR	1 00	х						0	0	
56) D CYNTHIA JULIEN DIRECTOR	1 00	х						0	0	
57) TOM KING IRECTOR 58) HERBERT A LANFORD JR	1 00	X						0	0	
DIRECTOR 59) KARL A MALONE DIRECTOR	1 00	X						0	0	
60) CAROLYN D MEADOWS DIRECTOR	1 00	Х						0	0	
61) JOHN F MILIUS DIRECTOR 62) BILL MILLER	1 00	Х						0	0	
DIRÉCTOR 63) OWEN P MILLS	1 00	X						0	0	
VIRECTOR 64) CLETA MITCHELL VIRECTOR	1 00	X						0	0	
65) GROVER G NORQUIST IRECTOR	1 00	х						0	0	
66) OLIVER L NORTH IRECTOR 67) JOHNNY NUGENT	1 00	X						0	0	
IRECTOR 58) TED NUGENT	1 00	X						0	0	
IRECTOR 59) LANCE OLSEN IRECTOR	1 00	х						90,000	0	
70) TIMOTHY W PAWOL IRECTOR	1 00	х						0	0	
71) PETER J PRINTZ IRECTOR 72) TODD J RATHNER	1 00	X						0	0	
IRÉCTOR 73) WAYNE ANTHONY ROSS	1 00	X						0	0	
IRECTOR 74) CARL T ROWAN JR IRECTOR	1 00	×						0	0	
75) don saba Irector	1 00	х						0	0	
76) ROBERT E SANDERS IRECTOR 77) STEVEN C SCHREINER	1 00	×						0	0	
IRECTOR 78) HAROLD W SCHROEDER IRECTOR	1 00	×						0	0	
79) TOM SELLECK DIRECTOR	1 00	х						0	0	
30) JOHN C SIGLER IRECTOR 31) DWIGHT D VAN HORN	1 00	Х						0	0	
IRECTOR 32) ROBERT L VIDEN JR	1 00	X						0	0	
IRECTOR 33) HOWARD J WALTER IRECTOR	1 00	×						0	0	
34) JD WILLIAMS IRECTOR	1 00	х						0	0	
35) DENNIS L WILLING IRECTOR 36) ROBERT J WOS	1 00	Х						0	0	
IRÉCTOR 37) DONALD E YOUNG	1 00	X						0	0	
IRÉCTOR L b Sub-Total							>	J		
c Total from continuation sheetsd Total (add lines 1b and 1c) .						•	Þ	5,579,153		631,25
Total number of individuals (inc \$100,000 in reportable compe	luding but not lim	nited to	those	list) who	received more thai	1	
3 Did the organization list any fo i on line 1a? <i>If</i> "Yes," complete Sc					y en	nploy	ee, o	r highest compensa		Yes No
For any individual listed on line organization and related organization.	1a, is the sum of	reporta	ble c	omp					from the	- IN 0
organization and related organiz	-	an \$15	0,000	. Ii	Ye.	∍,″ CO. •	mple •	te screaule J for suc		1 Yes
individual										- 100

4	4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual						
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person						
Section B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization						

e 1a receive or accrue compensation from any unrelated org		5	No
Contractors			
five highest compensated independent contractors that red from the organization	ceived more than		
(A) Name and business address	(B) Description of services		(C) Compensation
	MEMBERSHIP PROC SOLICITOR		12,397,032

		2010) Statement of Reven					Pag	e 9
rt VI		Federated campaigns	1a		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	1
and other similar amounts								
ᅙ		Membership dues						
₹	С	Fundraising events	1 c					
₹	d	Related organizations	. 1d	12,573,541				
뜷	e	Government grants (contributions)	1e					
<u>a</u>	f	All other contributions, gifts, grants	s, and 1f	58,572,260				
₽		similar amounts not included above Noncash contributions included in li						
2	_				71 145 001			
æ	h	Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·		71,145,801			
ا د	_			Business Code				
anna an rai ba markan	2a b	PROGRAM FEES			6,552,336	6,552,336		
2		MEMBER DUES			100,531,465	100,531,465		
<u> </u>	c							
₹	d							
	e							
٦	f	All other program service re	venue					
-	a	Total. Add lines 2a-2f			107,083,801			
3		Investment income (includir						
		and other similar amounts)	•		852,154			852,1
4	4	Income from investment of tax-ex	empt bond proceeds 🕨					
	5	Royalties			11,303,074			11,303,0
			(ı) Real	(II) Personal				11,505,0
	6a	Gross Rents	1,536,497	(,				
		Less rental	1,543,676					
		expenses Rental income	-7,179					
		or (loss) Net rental income or (loss)	b-		-7,179			-7,1
		Net rental income of (1033)	(ı) Securities	(II) O ther	.,2			1,7-
7		Gross amount from sales of assets other than inventory	19,870,269	(ii) o tilei				
		Less cost or other basis and	17,262,150					
		sales expenses Gain or (loss)	2,608,119					
		Net gain or (loss)			2,608,119			2,608,1
-		Gross income from fundraisi			2,000,113			2,000,
		(not including \$ of contributions reported on	line 1c)					
		See Part IV, line 18	а	429,695				
	b	Less direct expenses .	ь	236,738				
		Net income or (loss) from fu			192,957			192,9
9	9a	Gross income from gaming a	ectivities See Part IV, line 19 .	а				
				ь				
		Net income or (loss) from ga						
1		Gross sales of inventory, les returns and allowances .	a a	17,943,309				
		Less cost of goods sold .		6,198,109				
	с	Net income or (loss) from sa	iles of inventory 🕨		11,745,200	10,067,029	1,678,171	
		Miscellaneous Revenue		Business Code				
1	11a	ADVERTISING		541800	20,922,249	4,765	20,866,889	50,5
	b	SUBSCRIPTIONS		541800	1,506,014	1,506,014		
		NRA CAFE SALES		722210	459,089			459,0
		All other revenue	•					
		Total. Add lines 11a-11d			22,887,352			
		Total revenue. See Instructi		<u>L</u>				_

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations mu			(D)	
	Il other organizations must complete column (A) but are not required to		(B), (C), and ((D).	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	189,000	189,000		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	30,500	30,500		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. 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	4,168,553	2,196,138	1,708,567	263,848
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	33,141,573	23,315,768	7,421,684	2,404,121
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,284,170	4,555,464	2,206,761	521,945
9	Other employee benefits	4,524,889	3,170,017	1,030,643	324,229
10	Payroll taxes	2,547,465	1,784,685	580,242	182,538
а	Fees for services (non-employees) Management	0			
b	Legal	3,582,244	3,120,380	461,864	
c	Accounting	117,200		117,200	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	7,989,955			7,989,955
f	Investment management fees	219,167		219,167	
g	Other	4,665,094	4,665,094	,	
12	Advertising and promotion	28,506,230	20,315,496		8,190,734
13	Office expenses	4,136,496	2,125,967	2,010,529	
14	Information technology	5,894,109	3,486,954	2,407,155	
15	Royalties	0	, ,	, ,	
16	Occupancy	1,952,024	992,051	959,973	
17	Travel	6,085,855	4,733,186	1,352,669	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	1,111,111		
19	Conferences, conventions, and meetings	5,338,324	4,225,714	1,112,610	
20	Interest	1,369,546	976,749	392,797	
21	Payments to affiliates	0	,	,	
22	Depreciation, depletion, and amortization	2,508,907	1,772,561	736,346	
23	Insurance	1,014,514	1,014,514	,	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	, ,	, ,		
а	MEMBER COMMUNICATIONS	57,011,926	45,243,773		11,768,153
b	PRINTING AND SHIPPING	23,975,743	23,975,743		
c	PRO GRAM SERVICES	16,696,651	16,696,651		
d	ADDITIONAL INSTITUTE FOR LEGISLATIVE ACTION	9,943,784	7,486,001	1,236,714	1,221,069
е	FULFILLMENT MATERIAL	6,464,184	5,814,882	116,695	532,607
f	All other expenses	4,176,172	3,143,957	519,393	512,822
25	Total functional expenses. Add lines 1 through 24f	243,534,275	185,031,245	24,591,009	33,912,021
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments		18,396,784	2	9,373,624	
	3	Pledges and grants receivable, net	2,528,075	3	3,244,548		
	4	Accounts receivable, net			49,767,997	4	52,606,967
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$, and contributing e sponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions)	ers, and				
ets.		Schedule L				6	
ssets	7	Notes and loans receivable, net			3,133,320	7	3,111,070
₫	8	Inventories for sale or use			10,888,636	8	13,178,944
	9	Prepaid expenses and deferred charges			2,167,086	9	2,739,275
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	64,949,941			
	ь	Less accumulated depreciation	10b	28,228,772	36,186,545	10c	36,721,169
	11	Investments—publicly traded securities			29,042,690	11	33,133,504
	12	Investments—other securities See Part IV , line 11 \cdot . \cdot		•	3,341,890	12	4,602,761
	13	Investments—program-related See Part IV , line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			4,862,341	15	5,069,338
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			160,315,364	16	163,781,200
	17	Accounts payable and accrued expenses .			59,109,001	17	59,163,137
	18	Grants payable				18	
	19	Deferred revenue			28,119,095	19	28,336,891
	20	Tax-exempt bond liabilities				20	
e S	21	Escrow or custodial account liability Complete Part IV of Schedu	le D			21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ę		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			29,340,012	23	45,335,166
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			6,171,924	25	6,795,712
	26	Total liabilities. Add lines 17 through 25			122,740,032	26	139,630,906
<u>ر</u>		Organizations that follow SFAS 117, check here ▶ 🔽 and com	plet e l	ines 27			
9		through 29, and lines 33 and 34.					
ㅁ	27	Unrestricted net assets			11,164,773	27	-6,423,671
Fund Balances	28	Temporarily restricted net assets			3,207,708	28	6,253,866
Ξ	29	Permanently restricted net assets			23,202,851	29	24,320,099
or Fu		Organizations that do not follow SFAS 117, check here ► ☐ allines 30 through 34.	nd con	nplet e			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fo	unds			32	
Net	33	Total net assets or fund balances			37,575,332	33	24,150,294
Z	34	Total liabilities and net assets/fund balances			160,315,364	34	163,781,200
	i				1		

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		227,8	311,279
2	Total expenses (must equal Part IX, column (A), line 25)	2		243,5	534,275
3	Revenue less expenses Subtract line 2 from line 1	3		-15,7	722,996
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		37,5	575,332
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2,2	297,958
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		24,1	150,294
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	•
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	sued			
3a	,		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

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OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

ternal	Revenue Service	► Attach to F	orm 990. 🟲 See separa	ate instructions.		Inspect	ion
	ne of the organi				Employer ident	ification numbe	ī
NAT	IONAL RIFLE ASSOC	IATION OF AMERICA			53-0116130		
Pa	rt I Organi	izations Maintaining Donor A	dvised Funds or	Other Similar Fu		ınts. Complet	e if the
	organız	ation answered "Yes" to Form 9			,,, <u> </u>		
	T - 4 - 1		(a) Donor ad	vised funds	(b) Funds a	ind other accoun	its
	Total number at	•					
	33 3	ributions to (during year)					
,	30 3 3	ts from (during year)					
, ,	Aggregate value Did the organiz	e at end of year ation inform all donors and donor adv	L visors in writing that th	e assets held in don	or advised		
	funds are the o	rganization's property, subject to the	organization's exclus	ive legal control?		Yes	No
•	used only for ch	ation inform all grantees, donors, and haritable purposes and not for the be			•	☐ Yes	┌ No
) Dal		rmissible private benefit rvation Easements. Complete	ouf the organization	answered "Ves" to	n Form 990 Pai	<u> </u>	, 110
النك		onservation easements held by the o			5 101111 330, Pai	1C 1V, IIIIC /.	
•		onservation easements neid by the connection of land for public use (e.g., recreat	· · · · —		historically impo	rtantly land area	
	_	of natural habitat		Preservation of a c		•	
	Preservation	on of open space					
2	•	2a-2d if the organization held a qua	lified conservation coi	ntribution in the form	of a conservation	1	
		·			Held at	the End of the	Year
а	Total number o	f conservation easements			2a		
b	Total acreage r	estricted by conservation easement	s		2b		
c	Number of cons	servation easements on a certified hi	storic structure includ	ed ın (a)	2c		
d	Number of cons	servation easements included in (c) a	acquired after 8/17/06		2d		
3	Number of cons	servation easements modified, transf	erred, released, exting	juished, or terminate	d by the organizat	tion during	
	the taxable yea	ar ▶					
ļ	Number of state	es where property subject to conserv	vation easement is loc	ated 🕨			
5		iization have a written policy regardir		•	— Iling of violations .	. and	
	_	the conservation easements it holds		5,	, .	☐ Yes	┌ No
5	Staff and volun	teer hours devoted to monitoring, ins	pecting and enforcing	conservation easem	ents during the ye	ear >	
,	A mount of expe	enses incurred in monitoring, inspect	ıng, and enforcıng con	servation easements	during the year	► \$	
3		servation easement reported on line and 170(h)(4)(B)(ii)?	2(d) above satisfy the	requirements of sec	tion	☐ Yes	┌ No
)	balance sheet,	scribe how the organization reports of and include, if applicable, the text of n's accounting for conservation ease	the footnote to the or		•	•	
ar		izations Maintaining Collection		ical Treasures,	or Other Simil	lar Assets.	
	Comple	ete if the organization answered	"Yes" to Form 990,	Part IV, line 8.			
la.	art, historical t	tion elected, as permitted under SFAS reasures, or other similar assets held XIV, the text of the footnote to its fi	d for public exhibition,	education or researc	h in furtherance o		,
	provide, in Part	. XIV, the text of the loothole to its if	nancial statements th	at describes these it	ems		
b	If the organizat	cion elected, as permitted under SFAS ures, or other similar assets held for owing amounts relating to these item	S 116, to report in its public exhibition, edu	revenue statement a	nd balance sheet	•	
b	If the organizat historical treas provide the follo	tion elected, as permitted under SFAS ures, or other similar assets held for	S 116, to report in its public exhibition, edu is	revenue statement a	nd balance sheet n furtherance of pu	ublic service,	
b	If the organizat historical treas provide the follo (i) Revenues in	cion elected, as permitted under SFAS ures, or other similar assets held for owing amounts relating to these item	S 116, to report in its public exhibition, edu is	revenue statement a	nd balance sheet n furtherance of pu	•	

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	Organizations Maintaining Co	ollections of Art	:, His	storical Tr	eas	ures, or O	the	r Similaı	ASS	ets (ca	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne following t	that a	re a significa	nt u	se of its co	llectio	n	
а	Public exhibition		d	┌ Loan	orexo	:hange progr	ams				
ь	Scholarly research		e	┌ Other	-						
С	✓ Preservation for future generations										
4	Provide a description of the organization's c Part XIV	ollections and expla	ın hov	w they furthe	rthe	organızatıon	's e>	empt purp	ose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			,				ıılar	Г	Yes	√ No
Pai	rt IV Escrow and Custodial Arrang					n answere	d "Y	es" to For	m 99	0,	
_	Part IV, line 9, or reported an ar										
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				itions	or other ass	ets	not	Г	Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table		Г			A mo		
_	December helenes						1		AIIIO	unc	
c d	Beginning balance					-	1c				
	Additions during the year					-	1d				
e f	Distributions during the year					-	1e				
	Ending balance					L	1f				
2a	Did the organization include an amount on F		e 217						ļ	Yes	No
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete		200	word "Vo	c" to	Form 990	Dar	+ IV line	10		
Рa	Endowment Funds. Complete	(a)Current Year		Prior Year		Two Years Back		Three Years		e)Four Y	ears Back
1a	Beginning of year balance	8,687,890		6,920,616		7,675,3	<u> </u>	<u>, </u>	Ì	,	
b	Contributions	808,137		1,582,05	1	487,02	22				
c	Investment earnings or losses	549,205		750,029	9	-1,205,4	79				
d	Grants or scholarships										
e	Other expenditures for facilities	304,201		536,900							
f	and programs	30,020		27,906	5	36,2	13				
g	End of year balance	9,711,011		8,687,890	+	6,920,6	_				
2	Provide the estimated percentage of the year	, ,	as		<u> </u>	· · ·					
а	Board designated or quasi-endowment										
Ь	Permanent endowment - 100 000 %										
c	Term endowment										
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that are held	dand	admınıstere	d for	the			
	organization by									Yes	No
	(i) unrelated organizations				•		٠		3a(i)		Νο
	(ii) related organizations						•		3a(ii)	+	
ь 4	If "Yes" to 3a(II), are the related organization. Describe in Part XIV the intended uses of the				•		•		3b	Yes	
	t VI Investments—Land, Building				90 F	Part X line	10				
	Description of investment	-, <u>-</u> -qp		(a) Cost or basis (invest	other	(b)Cost or of basis (othe	her	(c) Accumu depreciat		(d) Boo	ok value
1a	Land					4,902	,450				4,902,450
	Buildings					47,869	-	24,4	00,367		3,828,275
	Leasehold improvements							,			
d	Equipment					12,178	,159	5,5	74,944		2,990,444
e	Other										

36,721,169

Part VII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
	(-,	Cost or end-of-year market value	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			
(a) Descrip		(b) Book value	
Total. (Column (b) should equal Form 990, Part X, col.(B) line in			
Part X Other Liabilities. See Form 990, Part > 1 (a) Description of Liability			
	(b) A mount		
Federal Income Taxes	1,000,000		
DERIVATIVE INSTRUMENT MARKET VALUATION OTHER MISCELLANEOUS LIABILITIES	5,051,972 743,740		
OTHER MISCELLANEOUS ETABLETTES	743,740		
		İ	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	6,795,712		

Part X	Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1 To	tal revenue (Form 990, Part VIII, column (A), line 12)	1	227,811,279
2 To	tal expenses (Form 990, Part IX, column (A), line 25)	2	243,534,275
3 Ex	cess or (deficit) for the year Subtract line 2 from line 1	3	-15,722,996
4 Ne	t unrealized gains (losses) on investments	4	1,005,312
5 Do	nated services and use of facilities	5	
6 In	vestment expenses	6	
7 Pr	or period adjustments	7	
8 Ot	her (Describe in Part XIV)	8	1,292,646
	tal adjustments (net) Add lines 4 - 8	9	2,297,958
	cess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-13,425,038
Part XI			· · ·
	otal revenue, gains, and other support per audited financial statements	1	237,358,520
2 A	mounts included on line 1 but not on Form 990, Part VIII, line 12		
a N	et unrealized gains on investments		
b D	onated services and use of facilities		
c R	ecoveries of prior year grants		
d 0	ther (Describe in Part XIV) 2d 830,644		
e A	dd lines 2a through 2d	2e	1,835,956
3 S	ubtract line 2e from line 1	3	235,522,564
4 A	mounts included on Form 990, Part VIII, line 12, but not on line 1		
a Ir	nvestment expenses not included on Form 990, Part VIII, line 7b . 4a		
b 0	ther (Describe in Part XIV)		
c A	dd lines 4a and 4b	4c	-7,711,285
5 T	otal Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	227,811,279
Part XI	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
	otal expenses and losses per audited financial	1	250,783,558
	mounts included on line 1 but not on Form 990, Part IX, line 25	<u> </u>	
	onated services and use of facilities		
	rior year adjustments	1	
	ther losses	1	
	ther (Describe in Part XIV)	1	
e A	dd lines 2a through 2d	2e	7,279,783
3 S	ubtract line 2e from line 1	3	243,503,775
4 A	mounts included on Form 990, Part IX, line 25, but not on line 1:		
a Ir	ovestment expenses not included on Form 990, Part VIII, line 7b 4a		
b 0	ther (Describe in Part XIV) 4b 30,500	1	
c A	dd lines 4a and 4b	4c	30,500
5 T	otal expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	243,534,275
Part X	IV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
III	1 a	FINANCIAL STATEMENT NOTE 1 THE VALUE OF THE NRAS FIREARMS MUSEUM COLLECTION HAS BEEN EXCLUDED FROM THE ACCOMPANYING STATEMENTS OF FINANCIAL POSITION ONLY PURCHASES OF FIREARMS AND OTHER OBJECTS, AND NOT DONATIONS, ARE RECOGNIZED IN THE STATEMENTS OF ACTIVITIES FIREARMS AND OTHER OBJECTS THAT HAVE BEEN ACCESSIONED IN THE NRA MUSEUM ARE NOT INTENDED FOR SALE OR EXCHANGE
III	4	THE NATIONAL FIREARMS MUSEUM PROMOTES GUN COLLECTING AND PRESERVATION OF HISTORY THROUGH THE HERITAGE OF FIREARMS PLEASE VISIT NRAMUSEUM ORG FOR EXCITING INFORMATION
V	4	NRA ENDOWMENT FUNDS BENEFIT NRA INSTITUTE FOR LEGISLATIVE ACTION, NATIONAL CHAMPIONSHIPS, MARKSMANSHIP, AND LAW ENFORCEMENT
X	2	MANAGEMENT EVALUATED THE NRAS TAX POSITIONS AND CONCLUDED THAT THE NRA HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE WITH FEW EXCEPTIONS, THE NRA IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U S FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2007, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOKBACK PERIOD
XI	8	INCLUDES AGENCY TRANSACTIONS, UNREALIZED GAIN ON DERIVATIVE INSTRUMENT, AND ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLAN
XII	2 d	INCLUDES AGENCY TRANSACTIONS AND UNREALIZED GAIN ON DERIVATIVE INSTRUMENT
XII	4 b	INCLUDES COST OF GOODS SOLD, RENTAL EXPENSE, AND INTEREST ON ENDOWMENT GRANTS
XIII	2 d	INCLUDES COST OF GOODS SOLD, RENTAL EXPENSE, AND ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLAN
XIII	4 b	INCLUDES INTEREST ON ENDOWMENT GRANTS

As Filed Data -

DLN: 93493270005081

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990,
 Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

Statement of Activities Outside the United States

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number

					53-0116130	
Pai	rt I General Information "Yes" to Form 990, Par			ne United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the o	organization n	naıntaın record	s to substantiate the	amount of the grants of	or
	assistance, the grantees' elig	_			-	
	the grants or assistance?					
2	For grant makers. Describe in Pa United States	irt V the organiz	atıon's procedur	es for monitoring the use	e of grant funds outside th	ne
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed))		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	Central America and the Caribbean			INVESTMENTS		4,000,000
	Central America and the Caribbean			PROGRAM SERVICES	LAW ENFORCE TRAINING	25,000
	-					
32	Sub-total					4,025,000
	Total from continuation sheets					1,525,600

c Totals (add lines 3a and 3b)

4,025,000

Pa	Part IV, I	line 15, for any	sistance to Organ y recipient who recess space is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3	Enter total nur	mber of other	organızatıons or en	tities				. ▶	
								Schodulo F	(Form 990) 2010

Part III	Grants and Other Assistance to	Individuals	Outside the Unit	ed States. Complete	if the organization a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if additional space is nee	eded.		-	_		

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			1				
		+	1		+		
	_		ſ	+	 	 	
			 		<u> </u>	<u> </u>	
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			1		,		
	+	+	<u> </u>		 		+
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		1	1		,		
	+	+	<u> </u>		-		
					<u> </u>	 	
			4			1	
			1		'	1	
		+	1		'		
	+	+	<u> </u>		+	<u> </u>	+
					<u> </u>	1	
			1			1	
			1		1		
		+	1		'		
		+	<u> </u>			 	+
			<u> </u>		<u> </u>	<u> </u>	<u> </u>

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	F	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	দ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	<u> </u>	Yes	Г	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	ত	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	굣	Νo

Schedule F (Form 990) 2010

information. Identifier	ReturnReference	Explanation
racitimer	Returniterence	Explanation

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

As Filed Data -

DLN: 93493270005081

Su

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.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number

53-0116130

Part I	Fundraising	Activities.	Complete if	f the organiz	ation answered	d "Yes" to	Form 990,	Part IV,	line 17.

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

or entity (fundraiser)		fundraiser have custody or control of contributions?		(IV) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
INFOCISION	PAID SOLICITOR		Νο	12,739,255	7,687,860	5,051,395
STRATEGIC FUNDRAISING	PAID SOLICITOR		No	450,077	302,095	147,982
Total			•	13,189,332	7,989,955	5,199,377

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

KY, NY, PA, UT, VA

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 ILA CHARLOTTE (event type)	(b) Event #2 (event type)	(c) O ther Events (total number)	(d) Total Events (Add col (a) through col (c))
Reveilue	1 2	Gross receipts Less Charitable	429,69!	5		429,695
æ	3	contributions Gross income (line 1 minus line 2)	429,699	5		429,695
	4	Cash prizes				
10	5	Non-cash prizes				
Expenses	6	Rent/facility costs				
ă ă	7	Food and beverages				
Drea	8	Entertainment				
à	9	Other direct expenses .	236,738	3		236,738
	10	Direct expense summary Add line	es 4 through 9 ın column	(d)	🛌	236,738
	11	Net income summary Combine li	nes 3 and 10 ın column (d)		192,957
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
ses	2	Cash prizes				
xpenses	3	Non-cash prizes				
ш	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes %	┌ Yes % ┌ No	┌ Yes %	
		Direct expense summary Add lines				
	8	Net gaming income summary Com	bine lines 1 and / in colu	ımn (d)	<u> </u>	
9 a b	Is t	er the state(s) in which the organiza the organization licensed to operate No," Explain	gamıng activities in eac			Yes No
10a b		re any of the organization's gaming l Yes," Explain			the tax year?	· · Fyes Fno

revenue?	11	Does the organization operate ga	aming activities with nonmembers? .		┌ _{Yes} ┌ _{No}
Indicate the percentage of gaming activity operated in a The organization's facility An outside facility Interpretation is facility Address Name Address Does the organization have a contract with a third party from whom the organization's gaming/special events books and records Name Address Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization \$ \$ and the amount of gaming revenue retained by the third party \$ \$ and the amount of gaming revenue retained by the third party \$ \$ and the amount of gaming revenue retained by the third party \$ \$ and the amount of gaming manager information Name Address Address Description of services provided Director/officer Employee Independent contractor 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 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 \$ \$ Partivices \$ Partivices \$ Partivices \$ \$ Partivices \$ Partivices \$ Partivices \$ \$ Partivices \$ \$ Partivices \$ \$ \$ Partivices \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	L2	Is the organization a grantor, ber	neficiary or trustee of a trust or a mem	ber of a partnership or other entity	
a The organization's facility		formed to administer charitable g	gaming?		┌ _{Yes} ┌ _{No}
An outside facility	L3	Indicate the percentage of gamir	ng activity operated in		
Name ► Address ► LSa Does the organization have a contract with a third party from whom the organization receives gaming revenue?	а	The organization's facility		13a	
Address ► Address ► Address ► Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming manager information Name ► Gaming manager compensation ►\$ Description of services provided ► Director/officer	b	An outside facility		13b	
Address ► Address ► Address ► Does the organization have a contract with a third party from whom the organization receives gaming revenue?	14		fthe person who prepares the organiza	tion's gaming/special events books and	
Address ► 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		records			
Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Name 🟲			
revenue?		Address 🟲			
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming and address Name ▶ Address ▶ Address ▶ Gaming manager information Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ 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?	15a	Does the organization have a cor	ntract with a third party from whom the	organization receives gaming	
amount of gaming revenue retained by the third party \(\) \\$ C If "Yes," enter name and address Name \(\) Address \(\) Address \(\) 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? \(\) \(\) \(\) \(\) \(\) 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 Complete this part to provide additional information for responses to question on Schedule G (see instructions.)		revenue?			┌ _{Yes} ┌ _{No}
Address ► Address ► Address ► Gaming manager information Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer	b				
Address ► Address ► Address ► Gaming manager information Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer	_				
Address Gaming manager information Name Gaming manager compensation \$ Description of services provided Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		if yes, entername and address	5		
Name Gaming manager compensation \$ Director/officer		Name 🟲			
Name Gaming manager compensation \$ Director/officer					
Name Gaming manager compensation \$ Director/officer		Address 🟲			
Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer					
Gaming manager compensation ► \$ Description of services provided ► Director/officer	16	Gaming manager information			
Description of services provided ► Director/officer					
Gaming manager compensation ► \$ Description of services provided ► Director/officer		N b			
Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Name F			
Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Gaming manager compensation	\$		
If the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Description of services provided	•		
If the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		F	- .		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		,	I Employee	I Independent contractor	
retain the state gaming license?		•	er state law to make charitable distribi	itions from the gaming proceeds to	
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 Complete this part to provide additional information for responses to question on Schedule G (see instructions.)	4				
In the organization's own exempt activities during the tax year ► \$ Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)	b	<u> </u>			res I No
instructions.)	-				
	Par	t IV Complete this part to p		responses to question on Schedule G (se	ee
		•	ReturnReference	Evalanation	

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Schedule I

(Form 990)

DLN: 93493270005081 OMB No 1545-0047

2010

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

Department of the Treasury Internal Revenue Service		omplete if the organization	Attach to Form 9		21 01 22.		Open to Public Inspection
Name of the organization NATIONAL RIFLE ASSOCIATI	ON OF AMERICA					Employer identif	ication number
						53-0116130	
		and Assistance					
Does the organization mai the selection criteria used	I to award the grants	or assistance?					√ Yes
2 Describe in Part IV the or	<u> </u>	Governments and			Complete if the	raanization answere	d "Voc" to
Form 990, Part I	V, line 21 for any	recipient that received	l more than \$5,000.	Check this box if no	o one recipient rec	eived more than \$5,0	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LAW ENFORCEMENT ALLIANCE7700 LEESBURG OIKE FALLS CHURCH, VA 22043	54-1798397	501c4	180,000				LAW ENFORCEMENT
(2) NATIONAL FDN FOR WOMEN LEGISLATORS910 16TH ST NW WASHINGTON, DC 20006	52-1480785	501c3	9,000				SCHOLARSHIPS
2 Enter total number of sect	uon 501(c)(3) and go	overnment organizations					<u> </u>
3 Enter total number of othe							1

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) UNDERGRADUATE SCHOLARSHIPS	19	30,500			

Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.							
Ident if ier	Return Reference	Explanation						
		NRA-ILA PROVIDES GRANT SUPPORT TO LEAA EDUCATION AND TRAINING INITIATIVES, AND NRA ACTIVELY ASSISTS NATIONAL FOUNDATION OF WOMEN LEGISLATORS IN THE SELECTION AND ADMINISTRATION OF NFWL SCHOLARSHIPS						

DLN: 93493270005081

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

NAT	IONAL RIFLE ASSOCIATION OF AMERICA			
	53-0116130			
Pa	rt I Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropiate 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			
	First-class or charter travel			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments ▼ Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		Νo
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	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			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	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			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
۵	If "Vac" to line 9, did the organization also follow the rebuttable prosumption procedure described in Regulations			İ

section 53 4958-6(c)?

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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	fW-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation		(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) WAYNE LAPIERRE	(ı) (ıı)	674,117	132,008	29,344	92,913	41,918	970,300	
(2) CHRIS W COX	(ı) (ıı)	478,033	91,560	18,819	41,891	35,825	666,128	
(3) WILSON H PHILLIPS JR	(1) (11)	401,384	92,156	25,798	103,460	26,747	7 649,545	
(4) KAYNE B ROBINSON	(1) (11)	418,893	88,595	519,729	18,130	33,838	1,079,185	175,170
(5) EDWARD J LAND JR	(1) (11)	358,117	44,819	9,591	18,130	31,705	462,362	
(6) TYLER SCHROPP	(ı) (ıı)	359,289	75,000	8,187	14,700	45,120	502,296	
(7) MARY CORRIGAN	(ı) (ıı)	324,416		4,752	28,868	5,961	1 363,997	
(8) JOSEPH GRAHAM	(1) (11)	229,116	100,000	23,358	18,130	26,135	396,739	
(9) MICHAEL MARCELLIN	(1) (11)	149,680	176,546	18,876	18,130	33,628	396,860	
(10) ROBERT MARCARIO	(1) (11)	218,290	29,242	3,225	14,011	34,064	298,832	
(11) DAVID BUTZ	(ı) (ıı)	151,033					151,033	
(12) MARION P HAMMER	(ı) (ıı)	140,000	50,000				190,000	
(13)	 ,		1	1		1		
(14)	 		ſ <u></u> '	ſ <u></u>				
(15)	 ,		1	1		1		
(16)	 '	1	1	1		1		

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
I	1 a	CHARTER TRAVEL WAS USED ON OCCASIONS INVOLVING MULTIPLE EVENTS WHEN REDUCED AIRLINE SCHEDULES PRECLUDED OTHER OPTIONS THIS WAS PROPERLY EXCLUDED FROM TAXABLE COMPENSATION
I	1 a	CERTAIN COMPENSATION ELEMENTS WERE GROSSED UP ALL TAX GROSS-UPS WERE PROPERLY INCLUDED IN TAXABLE COMPENSATION
I	1 a	CLUBS, SUCH AS SAFARI CLUB AND LUNCHEON CLUB, ARE USED FOR BUSINESS PURPOSES THIS WAS PROPERLY EXCLUDED FROM TAXABLE COMPENSATION
I	4 b	THE 457F SERVICE COST INCLUDED IN DEFERRED COMPENSATION FOR WAYNE LAPIERRE WAS 74,783, FOR CHRIS W COX 23,761, FOR WILSON H PHILLIPS JR 85,330, AND FOR MARY CORRIGAN 10,738 THE NRA DECIDES THE BENEFIT AMOUNT AND TIMEFRAME FOR VESTING FOR EACH PARTICIPANT THE 457F PLAN IS ALSO DESIGNED TO SUPPLEMENT THE CURRENT DEFINED BENEFIT PLAN WHERE CURRENT BENEFIT LAW CAUSES LOW REPLACEMENT RATIOS FOR SOME PARTICIPANTS
II		COLUMN E READER NOTE TOTAL COMPENSATION IN SCHEDULE J PART II COLUMN E SHOULD NOT BE EXPECTED TO TIE TO 990 PART VII COMPENSATION TOTALS PER EMPLOYEE DUE TO DIFFERENT DEFINITIONS AND EXCLUSIONS
II		COLUMN BIII OTHER REPORTABLE COMPENSATION IN TAXABLE WAGES INCLUDES 457B, AUTO AND LIFE BENEFITS IN ADDITION, FOR KAYNE ROBINSON IT INCLUDES VESTING AND ONE-TIME DISTRIBUTION OF DEFERRED COMPENSATION AS REQUIRED BY REGULATIONS
II		COLUMN C INCLUDES THE EMPLOYER-PAID PORTIONS OF THE NRA DEFINED BENEFIT PLAN, 401K PLAN, AND 457F PLAN

Schedule J (Form 990) 2010

As Filed Data -

DLN: 93493270005081

Transactions with Interested Persons

Schedule L (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public Inspection

	f t he organizat ion _ RIFLE ASSOCIATION OF AMERIC	CA .						E	mployer i	dentifica	ation numbe	er
									3-01161			
Part I	Excess Benefit Trai										line 40h	
				163 011101	n 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line						orrected	
1	(a) Name or disq	(a) Name of disqualified per				(b) Description of trar			action		Yes	No
					-							
					ļ							
	er the amount of tax impos tion 4958	ed on t	he orgai			r dısqualıfıed pers				r ▶ \$		
3 Ent	er the amount of tax, ıf any	, on lın	e 2, abo	ve, reımburs	ed by th	ne organization .			•	- \$		
Part I	Loans to and/or l	From	Intere	sted Per	sons							
	Complete if the organiz					0, Part IV, line 26	, or For	m 990-	EZ, Part \	/, line 38	3a	
		(b) L	oan to					_	(f)			
(a) Nam	e of interested person and	or fro	om the	(c)0 rig		(d)Balance due	(e) defau		A ppro by boa		(g)Writt agreeme	
	purpose	organ	ızatıon?	principal a	amount	(a)Bululice due			committee?			
		То	From				Yes	No	Yes	No	Yes	No
								<u> </u>				
Total .					▶ \$							•
Part II												
	Complete if the orga	nızatı						27.				
			hip between interested person nd the organization			(c)A mount of grant or type of assistance				tance		

Part IV Business Transactions Involving Interested Persons.

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

Complete if the organization	il alisweled les oil	TOTHI 330, Fait IV, III	16 20a, 20b, 01 20c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) MARION HAMMER	DIRECTOR	190,000	CONSULTING		Νο
(2) DAVID BUTZ	DIRECTOR	151,033	CONSULTING		Νο

Supplemental Information

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

Identifier Return Reference Explanat

Schedule L (Form 990 or 990-EZ) 2010

As Filed Data -

DLN: 93493270005081

OMB No 1545-0047

2010

Department of the Treasury
Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

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

Supplemental Information to Form 990 or 990-EZ

Attach to Form 990 or 990-EZ.

Open to Public Inspection

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

53-0116130

ldentifier	Return Reference	Explanation
Form 990 Part I	7	READER NOTE THE 990 COVER PAGE SHOWS GROSS UNRELATED BUSINESS REVENUE ON LINE 7A AND NEGATIVE UNRELATED BUSINESS TAXABLE INCOME ON LINE 7B BECAUSE RELATED EXPENSES EXCEEDED REVENUE IN THE YEAR 2010 FOR UNRELATED BUSINESS ACTIVITIES

ldentifier	Return Reference	Explanation
Form 990 Part VI	6	NRA IS A MEMBERSHIP ASSOCIATION

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

ldentifier	Return Reference	Explanation
Form 990 Part VI		CERTAIN BOARD DECISIONS ARE SUBJECT TO MEMBERSHIP APPROVAL PER BYLAWS AND NEW YORK NOT FOR PROFIT CORPORATE LAW

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

ldentifier	Return Reference	Explanation
Form 990 Part VI	19	NRA BYLAWS AND CONSOLIDATED ANNUAL FINANCIAL STATEMENTS ARE MAILED UPON REQUEST NRA DOES NOT MAKE INTERNAL OPERATING POLICIES AVAILABLE TO THE GENERAL PUBLIC

Identifier	Return Reference	Explanation
Form 990 Part VI	12c	ANNUAL FILINGS BY ALL BOARD MEMBERS ARE REVIEWED BY THE NRA AUDIT COMMITTEE

ldentifier	Return Reference	Explanation
Form 990 Part VI	15a,15b	COMPENSATION IS REVIEWED BY BOARD COMPENSATION COMMITTEE AND INDEPENDENT COMPENSATION AND BENEFITS CONSULTING FIRM INCLUDING BENCHMARKING AND INDUSTRY BEST PRACTICES

Identifier	Return Reference	Explanation
Form 990 Part VII		OFFICERS OF THE NRA ALSO SPEND TIME SERVING ON BOARDS OF THE NRA CHARITABLE AFFILIATES AS DISCLOSED IN THE FOLLOWING LIST NRA PRESIDENT RON SCHMEITS SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA FOUNDATION AND NRA SPECIAL CONTRIBUTION FUND NRA 1ST VICE PRESIDENT JIM PORTER SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA FOUNDATION, NRA SPECIAL CONTRIBUTION FUND, AND NRA CIVIL RIGHTS DEFENSE FUND WAYNE LAPIERRE SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA FREEDOM ACTION FOUNDATION WILSON H PHILLIPS JR SPENDS 1 ADDITIONAL HOUR PER WEEK ON EACH OF NRA FOUNDATION, NRA SPECIAL CONTRIBUTION FUND, NRA CIVIL RIGHTS DEFENSE FUND, AND NRA FREEDOM ACTION FOUNDATION KAYNE ROBINSON SPENDS 1 ADDITIONAL HOUR PER WEEK ON NRA SPECIAL CONTRIBUTION FUND

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

ldentifier	Return Reference	Explanation
Form 990 Part VII		CONTINUED FROM A BOVE BOB VIDEN ON NRA SPECIAL CONTRIBUTION FUND HAROLD VOLKMER ON NRA CIVIL RIGHTS DEFENSE FUND

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

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

ldentifier	Return Reference	Explanation
Form 990 Part III	4e	OTHER PROGRAM SERVICES INCLUDE MEMBERSHIP SERVICES, PUBLIC AFFAIRS, ANNUAL MEETING AND MEMBERS EXHIBIT HALL, EXECUTIVE, ADVANCEMENT, AND ADMIN PROGRAM EXPENSES

ldentifier	Return Reference	Explanation
Form 990 Part XI	5	RECONCILIATION INCLUDES ADJUSTMENT FOR AGENCY TRANSACTIONS, UNREALIZED GAINSLOSSES ON INVESTMENTS AND DERIVATIVE INSTRUMENT, AND ACCOUNTING PROCEDURE VALUATION ADJUSTMENT TO PENSION PLAN

DLN: 93493270005081

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury

Internal Revenue Service

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

				53-0116130			
Part I Identification of Disregarded Entities (Com	plete ıf the organızat	ion answered "Yes	" on Form 990, Pa	rt IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (sta or foreign country		(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during		e if the organizatio	n answered "Yes" (on Form 990, Part	IV, line 34 becaus	se it had	l one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	(g) 512(b)(1 trolled nization
(4) NDA FOUNDATION INC					<u> </u>	Yes	No
(1) NRA FOUNDATION INC	1	1	1		1		ı

Name, address, and Liv or related organization	Primary activity	or foreign country)	Exempt Code section	(if section 501(c)(3))	entity	controlled organization	
						Yes	No
(1) NRA FOUNDATION INC							
11250 WAPLES MILL RD	CHARITABLE	DC	501c3	LINE 7	NRA	Yes	
FAIRFAX, VA 22030 _52-1710886							
(2) NRA SPECIAL CONTRIBUTION FUND							
PO BOX 700	CHARITABLE	NM	501c3	LINE 11-TYPE I	NRA	Yes	
RATON, NM 87740 23-7367534							
(3) NRA CIVIL RIGHTS DEFENSE FUND							
11250 WAPLES MILL RD	CHARITABLE	VA	501c3	LINE 7	NRA	Yes	
FAIRFAX, VA 22030 52-1136665							
(4) NRA FREEDOM ACTION FOUNDATION							
11250 WAPLES MILL RD	CHARITABLE	VA	501c3	LINE 7	NRA	Yes	
FAIRFAX, VA 22030 26-1277941							
For Privacy Act and Panerwork Peduction Act Notice, see the Instruc	tions for Form 990	Cat No 5	01257	·	Schedule D / E	orm 000\	2010

Part III Identifi because	ication of Relagent to the second of the second one or many contracts on the second of the second on the second on the second of the second on	ted Orga ore relat	anizations Taxa ed organizations t	ble as a Partner reated as a partne	ship (Comple ership during	ete if the o the tax ye	organization ear.)	answe	ered "\	es" on Fo	rm 990,	Part	IV, lır	ne 34
(a) lame, 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 in	come Share	(g) e of end-of-year assets	(h Disprop allocat	ortionate	(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	
				ble as a Corpora ations treated as						nswered "Y	es" on	Form	990,	Part IV,
Name, address, an	(a) d EIN of related organi	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	Dir	(d) ect controlling entity	(e) Type of e (C corp, S or trust	corp,	Share of	(f) total income	Shar end-o	y) re of f-year sets		(h) Percentage ownership
													_	

chedu	ıle R (Form 990) 2010		Pa	age 3
Part	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
N	lote. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Dur	ing the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a F	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	Yes	
b (Gift, grant, or capital contribution to other organization(s)	1 b		No
c 0	Gift, grant, or capital contribution from other organization(s)	1c	Yes	
d L	oans or loan guarantees to or for other organization(s)	1d		No
e L	oans or loan guarantees by other organization(s)	1e		No
f S	Sale of assets to other organization(s)	1f		No
g F	Purchase of assets from other organization(s)	1 g		No
h E	Exchange of assets	1h		No
i L	ease of facilities, equipment, or other assets to other organization(s)	1 i		No
j L	ease of facilities, equipment, or other assets from other organization(s)	1j		No
k F	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
I P	erformance of services or membership or fundraising solicitations by other organization(s)	11		No
m S	Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n S	Sharing of paid employees	1n	Yes	
o F	Reimbursement paid to other organization for expenses	10		No
p F	Reimbursement paid by other organization for expenses	1р	Yes	
q	Other transfer of cash or property to other organization(s)	1 q		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

r O ther transfer of cash or property from other organization(s)

(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) NRA FOUNDATION INC	С	12,573,541	ACTUAL COST
(2) NRA FOUNDATION INC	n	4,126,180	ACTUAL COST
(3) NRA FOUNDATION INC	p	5,066,935	ACTUAL COST
(4) NRA SPECIAL CONTRIBUTION FUND	a	120,000	ACTUAL COST
(5) NRA SPECIAL CONTRIBUTION FUND	p	328,252	ACTUAL COST
(6) NRA CIVIL RIGHTS DEFENSE FUND	р	59,825	ACTUAL COST

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

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

(a) Name, address, and EIN of entity	(a) dress, and EIN of entity Primary activity Legal domicile (state or foreign country)		(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	man part	h) eral or aging tner?	
			Yes	No		Yes	No		Yes	No	
			-								
										+	
										+	
			1							1	
										+	
						_				+	
										+	
										T	
										+	
			+			-	+ +			+	
			1							\dagger	

Part VII Supplemental Information

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

Ident if ier	Return Reference	Explanation

Schedule R (Form 990) 2010

Software ID: 10000149

Software Version: 2010.2.15

EIN: 53-0116130

Name: NATIONAL RIFLE ASSOCIATION OF AMERICA

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1)	NRA FOUNDATION INC	С	12,573,541	ACTUAL COST
(2)	NRA FOUNDATION INC	n	4,126,180	ACTUAL COST
(3)	NRA FOUNDATION INC	р	5,066,935	ACTUAL COST
(4)	NRA SPECIAL CONTRIBUTION FUND	a	120,000	ACTUAL COST
(5)	NRA SPECIAL CONTRIBUTION FUND	р	328,252	ACTUAL COST
(6)	NRA CIVIL RIGHTS DEFENSE FUND	p	59,825	ACTUAL COST

Software ID: 10000149
Software Version: 2010.2.15

EIN: 53-0116130

Name: NATIONAL RIFLE ASSOCIATION OF AMERICA

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours		((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
WAYNE LAPIERRE EXEC VP	57 00			Х				835,469	0	125,615		
CHRIS W COX EXEC DIR, ILA	57 00			х				588,412	0	70,796		
WILSON H PHILLIPS JR TREASURER	52 00			х				519,338	0	124,168		
KAYNE B ROBINSON EXEC DIR, GENERAL OPERATIONS	50 00			х				1,027,217	0	45,056		
EDWARD J LAND JR SECRETARY	50 00			х				412,527	0	45,832		
RONALD L SCHMEITS PRESIDENT	20 00	Х		х				0	0	0		
DAVID A KEENE 1ST VICE PRESIDENT	20 00	х		х				0	0	0		
JAMES W PORTER II 2ND VICE PRESIDENT	20 00	Х		х				0	0	0		
TYLER SCHROPP EXEC DIRECTOR, ADVANCEMENT	52 00					Х		442,476	0	54,463		
MARY CORRIGAN CHIEF OF STAFF	40 00					х		329,168	0	30,373		
JOSEPH GRAHAM DIRECTOR, PUBLICATIONS	40 00					х		352,474	0	40,832		
MICHAEL MARCELLIN MANAGING DIRECTOR	40 00					Х		345,102	0	49,348		
ROBERT MARCARIO DIRECTOR, MEMBERSHIP	40 00					Х		250,757	0	44,773		
JOE M ALLBAUGH DIRECTOR	1 00	Х						0	0	0		
WILLIAM H ALLEN DIRECTOR	1 00	Х						0	0	0		
THOMAS PARVAS DIRECTOR	1 00	Х						0	0	0		
SCOTT L BACH DIRECTOR	1 00	Х						0	0	0		
WILLIAM A BACHENBERG DIRECTOR	1 00	Х						0	0	0		
FE BACHHUBER JR DIRECTOR	1 00	Х						0	0	0		
M CAROL BAMBERRY DIRECTOR	1 00	Х						0	0	0		
BOB BARR DIRECTOR	1 00	Х						0	0	0		
RONNIE G BARRETT DIRECTOR	1 00	Х						0	0	0		
CLEL BAUDLER DIRECTOR	1 00	Х						0	0	0		
DAVID E BENNETT III DIRECTOR	1 00	Х						0	0	0		
J KENNETH BLACKWELL DIRECTOR	1 00	Х						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours per	Posi t	((tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
MATT BLUNT DIRECTOR	1 00	x						0	0	0		
DAN BOREN DIRECTOR	1 00	Х						0	0	0		
ROBERT K BROWN DIRECTOR	1 00	×						0	0	0		
PETE BRO WNELL DIRECTOR	1 00	×						0	0	0		
JOHN P BURTT DIRECTOR	1 00	х						0	0	0		
DAVID BUTZ DIRECTOR	1 00	х						151,033	0	0		
J WILLIAM CARTER DIRECTOR	1 00	х						0	0	0		
RICHARD CHILDRESS DIRECTOR	1 00	х						0	0	0		
PATRICIA A CLARK DIRECTOR	1 00	х						0	0	0		
ALLAN D CORS DIRECTOR	1 00	х						0	0	0		
CHARLES L COTTON DIRECTOR	1 00	х						0	0	0		
DAVID G COY DIRECTOR	1 00	х						0	0	0		
LARRY E CRAIG DIRECTOR	1 00	х						0	0	0		
JOHN L CUSHMAN DIRECTOR	1 00	х						0	0	0		
WILLIAM H DAILEY DIRECTOR	1 00	Х						0	0	0		
JOSEPH P DEBERGALIS JR DIRECTOR	1 00	Х						0	0	0		
DONN C DIBIASIO DIRECTOR	1 00	Х						0	0	0		
MANUEL FERNANDEZ DIRECTOR	1 00	х						0	0	0		
EDIE P FLEEMAN DIRECTOR	1 00	х						0	0	0		
JOEL FRIEDMAN DIRECTOR	1 00	Х						0	0	0		
SANDRA S FROMAN DIRECTOR	1 00	Х						45,180	0	0		
TOM GAINES DIRECTOR	1 00	х						0	0	0		
JAMES S GILMORE III DIRECTOR	1 00	Х						0	0	0		
MARION P HAMMER DIRECTOR	1 00	х						190,000	0	0		
GRAHAM HILL DIRECTOR	1 00	x						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		((tion (hat a	che	')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
STEVE HORNADY DIRECTOR	1 00	×						0	0	0		
SUSAN HOWARD DIRECTOR	1 00	х						0	0	0		
ROYINNIS DIRECTOR	1 00	х						0	0	0		
H JOAQUIN JACKSON DIRECTOR	1 00	Х						0	0	0		
CURTIS S JENKINS DIRECTOR	1 00	Х						0	0	0		
D CYNTHIA JULIEN DIRECTOR	1 00	Х						0	0	0		
TOM KING DIRECTOR	1 00	Х						0	0	0		
HERBERT A LANFORD JR DIRECTOR	1 00	х						0	0	0		
KARLA MALONE DIRECTOR	1 00	х						0	0	0		
CAROLYN D MEADOWS DIRECTOR	1 00	х						0	0	0		
JOHN F MILIUS DIRECTOR	1 00	х						0	0	0		
BILL MILLER DIRECTOR	1 00	х						0	0	0		
OWEN P MILLS DIRECTOR	1 00	Х						0	0	0		
CLETA MITCHELL DIRECTOR	1 00	Х						0	0	0		
GROVER G NORQUIST DIRECTOR	1 00	Х						0	0	0		
OLIVER L NORTH DIRECTOR	1 00	Х						0	0	0		
JOHNNY NUGENT DIRECTOR	1 00	Х						0	0	0		
TED NUGENT DIRECTOR	1 00	х						0	0	0		
LANCE OLSEN DIRECTOR	1 00	Х						90,000	0	0		
TIMOTHY W PAWOL DIRECTOR	1 00	Х						0	0	0		
PETER J PRINTZ DIRECTOR	1 00	Х						0	0	0		
TODD J RATHNER DIRECTOR	1 00	х						0	0	0		
WAYNE ANTHONY ROSS DIRECTOR	1 00	х						0	0	0		
CARL T ROWAN JR DIRECTOR	1 00	Х						0	0	0		
DON SABA DIRECTOR	1 00	×						0	0	0		

(A) Name and Title	(B) A verage hours		(C tion (hat a	che		I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
ROBERT E SANDERS DIRECTOR	1 00	Х						0	0	0
STEVEN C SCHREINER DIRECTOR	1 00	×						0	0	0
HAROLD W SCHROEDER DIRECTOR	1 00	Х						0	0	0
TOM SELLECK DIRECTOR	1 00	х						0	0	0
JOHN C SIGLER DIRECTOR	1 00	х						0	0	0
DWIGHT D VAN HORN DIRECTOR	1 00	х						0	0	0
ROBERT L VIDEN JR DIRECTOR	1 00	х						0	0	0
HOWARD J WALTER DIRECTOR	1 00	х						0	0	0
JD WILLIAMS DIRECTOR	1 00	×						0	0	0
DENNIS L WILLING DIRECTOR	1 00	Х						0	0	0
ROBERT J WOS DIRECTOR	1 00	Х						0	0	0
DONALD E YOUNG DIRECTOR	1 00	х						0	0	0