

Form **990**

**Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

**2018**

Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

**A** For the 2018 calendar year, or tax year beginning and ending

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>NATIONAL RIFLE ASSOCIATION OF AMERICA</b>		<b>D</b> Employer identification number <b>53-0116130</b>
	Doing business as		<b>E</b> Telephone number <b>703-267-1000</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>367,702,748.</b>
	<b>11250 WAPLES MILL ROAD</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code <b>FAIRFAX, VA 22030</b>		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>F</b> Name and address of principal officer: <b>CRAIG B. SPRAY</b> <b>SAME AS C ABOVE</b>		<b>H(c)</b> Group exemption number ▶	

**I** Tax-exempt status:  501(c)(3)  501(c) ( **4** ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ **WWW.NRA.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: **1871** **M** State of legal domicile: **NY**

Part I Summary		Prior Year	Current Year
Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>FIREARMS SAFETY, EDUCATION, AND TRAINING; AND ADVOCACY ON BEHALF OF SAFE AND RESPONSIBLE GUN OWNERS</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>76</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>67</b>
	<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a)	<b>5</b>	<b>816</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>150000</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>23,943,194.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 38	<b>7b</b>	<b>0.</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>98,026,531.</b>	<b>108,599,726.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>146,955,303.</b>	<b>193,010,155.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>4,893,990.</b>	<b>2,192,041.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>62,111,910.</b>	<b>48,748,942.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>311,987,734.</b>	<b>352,550,864.</b>
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>93,334.</b>
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		<b>0.</b>	<b>0.</b>
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		<b>66,789,561.</b>	<b>63,864,842.</b>
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		<b>8,943,038.</b>	<b>7,798,658.</b>
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>48,091,585.</b>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<b>254,005,718.</b>	<b>283,536,156.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>329,831,651.</b>	<b>355,275,317.</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>-17,843,917.</b>	<b>-2,724,453.</b>	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> <b>196,125,681.</b>	<b>End of Year</b> <b>197,212,080.</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>171,175,478.</b>	<b>181,180,554.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>24,950,203.</b>	<b>16,031,526.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer	Date			
	<b>CRAIG B. SPRAY, TREASURER</b>	<b>11/14/19</b>			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	<b>ZACK FORTSCH, CPA</b>	<i>Zack Fortsch</i>	<b>11/14/19</b>	<input type="checkbox"/>	<b>P00052725</b>
	Firm's name ▶ <b>RSM US LLP</b>	Firm's EIN ▶ <b>42-0714325</b>	Phone no. <b>312-634-3400</b>		
	Firm's address ▶ <b>ONE SOUTH WACKER DR STE 800</b> <b>CHICAGO, IL 60606-3392</b>				

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WAYNE LAPIERRE CEO AND EXECUTIVE VICE PRESIDENT	(i)	1,267,878.	455,000.	427,756.	20,280.	53,513.	2,224,427.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CHRIS W. COX EXECUTIVE DIRECTOR, NRAILA	(i)	1,057,586.	200,000.	27,732.	35,484.	71,866.	1,392,668.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) WILSON H. PHILLIPS TREASURER (ENDING 9/13/2018)	(i)	573,567.	210,000.	116,970.	20,280.	27,952.	948,769.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOSHUA L. POWELL CHIEF OF STAFF AND EXEC. DIR	(i)	782,739.	0.	61,398.	16,500.	59,332.	919,969.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CRAIG B. SPRAY TREASURER (FROM 9/13/2018)	(i)	401,111.	0.	195,847.	16,500.	34,757.	648,215.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JOHN C. PRAZER SECRETARY AND GENERAL COUNSEL	(i)	325,953.	54,100.	33,023.	16,500.	60,077.	489,653.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JOSEPH P. DEBERGALIS, JR. EXEC DIR, GENERAL OPS (STARTING 12/3	(i)	347,452.	0.	55,774.	16,500.	41,302.	461,028.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) TYLER SCHROPP MANAGING DIRECTOR, ADVANCEMENT	(i)	604,803.	122,206.	6,136.	16,500.	57,123.	806,768.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) TODD GRABLE EXECUTIVE DIRECTOR, MEMBERSHIP	(i)	438,703.	217,553.	11,130.	16,500.	49,654.	733,540.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) DOUGLAS HAMLIN EXECUTIVE DIRECTOR, PUBLICATIONS	(i)	443,585.	80,000.	57,736.	16,443.	57,966.	655,730.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) DAVID LEHMAN DEPUTY EXECUTIVE DIRECTOR, NRAILA	(i)	450,057.	50,000.	71,675.	16,500.	14,621.	602,853.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) ERIC PROHARDT DIRECTOR, EDUCATION AND TRAINING	(i)	500,000.	0.	25,745.	15,000.	4,863.	545,608.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) ROBERT K. WEAVER FMR EXE. DIR, GENERAL OPERATIONS	(i)	0.	0.	720,000.	0.	0.	720,000.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) MICHEL MARCELLIN FMR MANAGING DIR, AFFINITY AND LICEN	(i)	0.	0.	535,045.	0.	0.	535,045.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) OLIVER L. NORTH PRESIDENT	(i)	1,377,617.	0.	0.	0.	0.	1,377,617.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) MARION P. HAMMER DIRECTOR	(i)	270,000.	0.	0.	0.	0.	270,000.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

**Part III Supplemental Information**

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

COLUMN B(I) MR. NORTH RECEIVED \$1,377,617 PAID BY AN UNRELATED ORGANIZATION, ACKERMAN MCQUEEN (AS FURTHER DETAILED ON SCHEDULE O).

COLUMN B(III) OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. LAPIERRE INCLUDED \$365,909 457(F) PAYOUT, \$38,862 GROUP LIFE INSURANCE, \$18,500 457(B) PLAN, AND \$4,485 TAXABLE PERSONAL EXPENSES.

OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. COX INCLUDED \$18,500 457(B) PLAN, \$7,830 GROUP LIFE INSURANCE, AND \$1,402 TAXABLE PERSONAL EXPENSES. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. PHILLIPS INCLUDED \$73,978 457(F) PAYOUT, \$21,012 GROUP LIFE INSURANCE, \$18,500 457(B) PLAN, AND \$3,480 TAXABLE PERSONAL EXPENSES.

OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. POWELL INCLUDED \$57,168 TAXABLE PERSONAL EXPENSES AND \$4,230 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. SPRAY INCLUDED \$175,174 ONE-TIME RELOCATION COSTS AND TEMPORARY LIVING EXPENSES, \$18,500 457(B) PLAN, AND \$2,173 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. FRAZER INCLUDED \$18,500 457(B) PLAN, \$10,681 TAXABLE PERSONAL EXPENSES, AND \$3,842 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE

Name of the organization

NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number

53-0116130

READERS ARE POLITELY REMINDED THE NRA WAS FOUNDED 147 YEARS AGO, IN 1871. THE NRA'S 1944 DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE IS AVAILABLE ON GUIDESTAR.ORG AND CAN ALSO BE REQUESTED DIRECTLY FROM THE NRA AS REQUIRED BY LAW. FORMS 990 CAN BE REQUESTED DIRECTLY FROM THE NRA AS REQUIRED BY LAW.

FORM 990, PART VII, SECTION A, LINE 1

THIS INFORMATIONAL NOTE REGARDS SERVICE ON THE NRA BOARD OF DIRECTORS, WHICH IS NOT COMPENSATED. BOARD MEMBERS WHO RECEIVED COMPENSATION IN 2018 WERE COMPENSATED FOR OTHER REASONS, NOT FOR THEIR VOLUNTARY BOARD SERVICE. MR. BUTZ, MS. FROMAN, MS. GOLOB, MS. HAMMER, MR. KEENE, MR. NUGENT, MR. OLSON, AND MR. SKELTON WERE COMPENSATED FOR OTHER PROFESSIONAL SERVICES THEY PERFORMED FOR THE ORGANIZATION. MR. BROWNELL, MS. LIGHTFOOT, AND MR. MILLS, AND MR. TED NUGENT RECEIVED MEMBERSHIP RECRUITING COMMISSIONS THAT WERE PAID TO THEIR COMPANIES. FOR THE PURPOSE OF DETERMINING THE COUNT OF INDEPENDENT DIRECTORS AS OF DECEMBER 31, 2018 SHOWN ON PART I LINE 3 AND PART VI LINE 1B, THE NINE DIRECTORS NOT CONSIDERED INDEPENDENT FOR 2018 WERE MR. BUTZ, MS. FROMAN, MS. GOLOB, MS. HAMMER, MR. KEENE, MR. NORTH, MR. NUGENT, MR. OLSON, AND MR. SKELTON.

FORM 990, PART VII, SECTION A, LINE 5

IN 2018, MR. NORTH RECEIVED NO COMPENSATION FROM THE NRA FOR HIS 20 HOURS PER WEEK AS NRA PRESIDENT. THE PAYMENTS OF \$1,377,617 WERE FROM AN UNRELATED ORGANIZATION, ACKERMAN MCQUEEN INC. CERTAIN OF THESE PAYMENTS ARE DISPUTED AND SUBJECT TO ONGOING LITIGATION. IN 2018. MS. GOLOB WAS ALSO COMPENSATED BY AN UNRELATED ORGANIZATION, ACKERMAN

Name of the organization

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53-0116130

MCQUEEN INC, \$28,661 FOR PROFESSIONAL SERVICES PERFORMED ON NRA DIGITAL MEDIA PROJECTS.

## FORM 990, PART VII SECTION B, LINE 1

THIS INFORMATIONAL NOTE PROVIDES ADDITIONAL DETAIL ABOUT AMOUNTS PAID TO OUTSIDE SERVICES PROVIDERS. THE FILING ORGANIZATION REPORTS COMPENSATION PAID TO SERVICES PROVIDERS EXCLUSIVE OF ADVERTISING AND OTHER MEDIA PLACED ON BEHALF OF THE FILING ORGANIZATION AND EXPENSES INCURRED ON BEHALF OF THE FILING ORGANIZATION. FOR EXAMPLE, THE FIGURE OF \$31,994,168 STATED ON PART VII SECTION B LINE 1 REFLECTS COMPENSATION FOR SERVICES PAID TO ACKERMAN MCQUEEN INC. IT EXCLUDES \$6,337,508 INCURRED FOR OUT OF POCKET EXPENDITURES ON BEHALF OF THE FILING ORGANIZATION INCLUDING MEDIA, OUTSIDE VENDOR COSTS, AND REIMBURSEMENT OF TRAVEL AND BUSINESS EXPENSES.

## FORM 990, PART VIII, LINE 2B

THIS INFORMATIONAL NOTE REGARDS THE REPORTING OF MEMBER DUES ON FORM 990. LINE 1B OF THE REVENUE STATEMENT IS PROPERLY LEFT BLANK. PURSUANT TO 990 INSTRUCTIONS, MEMBERSHIP DUES THAT ARE NOT CONTRIBUTIONS BECAUSE THEY COMPARE REASONABLY WITH AVAILABLE BENEFITS ARE SHOWN ON LINE 2. THUS, ALL NRA MEMBER DUES ARE PROPERLY SHOWN ON THE 990 REVENUE STATEMENT AS PROGRAM SERVICE REVENUE ON LINE 2, OTHER THAN NRA LIFE-PLUS CONTRIBUTIONS WHICH ARE PROPERLY COUNTED AS CONTRIBUTION REVENUE IN LINE 1F OF THE 990 REVENUE STATEMENT.

## FORM 990, PART IX, LINE 11

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
ACKERMAN MCQUEEN INC 1601 NW EXPRESSWAY, OKLAHOMA CITY, OK 73118	PUBLIC RELATIONS AND ADVERTISING	31,994,168.
INFOCISION MANAGEMENT CORP 325 SPRINGSIDE DR, AKRON, OH 44333	MEMBERSHIP PROCESSING AND CONTR	25,727,854.
BREWER ATTORNEYS AND COUNSELORS 1717 MAIN ST, SUITE 5900, DALLAS, TX 75201	LEGAL SERVICES	13,832,060.
MEMBERSHIP MARKETING PARTNERS LLC, 11250 WAPLES MILL TD, SUITE 310, FAIRFAX, VA	FUNDRAISING PRINTING AND MAILING	12,561,213.
VALTIM INC 1095 VENTURE DR, FOREST, VA 24551	FULFILLMENT CENTER	8,836,104.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶		123

**SEE PART VII, SECTION A CONTINUATION SHEETS**Form **990** (2018)