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Department of the Treasury

Return of Organization Exempt From Income Tax

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

2009

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 04-01-2009 and ending 03-31-2010 A For the 2009 D Employer identification number B Check if applicable HUMAN RIGHTS CAMPAIGN INC use IRS Address change 52-1243457 label or Doing Business As E Telephone number print or Name change type. See Specific (202) 628-4160 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-G Gross receipts \$ 28,783,407 Terminated tions. City or town, state or country, and ZIP + 4 WASHINGTON, DC 200363278 ✓ Amended return Application pending Name and address of principal officer Is this a group return for Joseph Solmonese affiliates? 1640 rhode island avenue nw WASHINGTON, DC 200363278 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 Website: ► WWW HRC ORG M State of legal domicile DC L Year of formation 1982 Part I Summary Briefly describe the organization's mission or most significant activities America's largest civil rights organization working to achieve LGBT equality Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . Number of independent voting members of the governing body (Part VI, line 1b) $\,$. $\,$. Total number of employees (Part V. line 2a) . . . 240 4,399 Total number of volunteers (estimate if necessary) . 196,000 Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 $\,$. **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 26,691,682 21,398,235 Program service revenue (Part VIII, line 2g) . 192,500 196,000 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 51,771 17,437 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,335,200 5,306,157 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 32,271,153 26,917,829 272,011 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 3.688.714 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 9.540.658 8.878.773 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . . 953,202 713,925 Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 3,075,458$ Ь **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 17,841,618 15,150,635 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 32,024,192 25,015,344 1,902,485 19 Revenue less expenses Subtract line 18 from line 12 . 246,961 t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 8,033,522 9,996,276 Total liabilities (Part X, line 26) . . 2,648,701 2,707,956 22 5,384,821 7,288,320 Net assets or fund balances Subtract line 21 from line 20 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 Sign ***** 2011-02-25 Here Signature of officer James Rinefierd Treasurer
Type or print name and title Preparer's identifying number Date Check if Robert Albrecht CPA Paid empolyed 🕨 🔽 Preparer's GELMAN ROSENBERG & FREEDMAN Firm's name (or yours EIN ▶ ıf self-employed), **Use Only** address, and ZIP + 44550 MONTGOMERY AVE SUITE 650 NORTH Phone no 🕨 (301) 951-9090 BETHESDA, MD 208142930

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The Human Rights Campaign is America's largest civil rights organization working to achieve lesbian,gay, bisexual and transgender equality By inspiring and engaging all Americans, HRC strives to end discrimination against LGBT citizens and realize a nation that achieves fundamental fairness and equality for all

4e	Total program serv	ice expenses►\$	18,387,836		
	(Expenses \$	· · · · · ·	luding grants of \$) (Revenue \$)
4d		•	nedule O) See also Addit id	•	
			more than 750,000 members an t events and other issues that in	d supporters Membership education and mob npact the LGBT community	ilization consists of informing
4c	(Code) (Expenses \$	7,147,215 including gr		972,322)
70	Public Policy, Education the mainstream press	& Training HRC worked to HRC also maintains a prese	build understanding and aware nce in the LGBT media to help e	ness of the LGBT community by telling our sto ducate, inform and engage our community H nd a variety of online outlets such as our awar	ries to the American public through RC worked to share our stories
4b	(Code) (Expenses \$	2,952,214 including gr	ants of \$ 227,511) (Revenue \$	
4a	AFFECT LGBT AMERICA PROTECTION ACT - AF CREATING THE BUSINE COORDINATING IN-DIS PRIORITY DISTRICTS VETERANS TELLING TH	INS AFTER HRC'S CALL TO TER MORE THAN 10 YEARS SS COALITION FOR WORKP TRICT LOBBYING BY 1,000 REPEAL OF "DON'T ASK DOI	ACTION IN 2009, CONGRESS PA: OF EFFORT HRC CONTINUED B LACE FAIRNESS, HOSTING 300 C HRC MEMBERS, AND EDUCATING I'T TELL" WAS ANOTHER PRIORI GOUT AGAINST DADT AT OVER 3	Ants of \$ 44,500) (Revenue \$ TO MEET WITH LAWMAKERS AND TO DEMAND SSED THE HISTORIC MATTHEW SHEPARD AND ROAD-BASED EFFORTS TO BUILD SUPPORT FO SCHERGY MEMBERS IN WASHINGTON, DC FOR C AND TRAINING FAITH COMMUNITIES ABOUT TY WITH THE "VOICES OF HONOR" TOUR FEATOR EVENTS IN KEY STATES, FOCUSED AND INT	D ACTION ON THE ISSUES THAT JAMES BYRD, JR HATE CRIMES OR A FULLY-INCLUSIVE ENDA BY CONGRESSIONAL LOBBYING, GENDER IDENTITY ISSUES IN TURING LGBT AND STRAIGHT
		s, the total expenses, a	and revenue, if any, for eac	(1) trusts are required to report the ar h program service reported	
4	•	•	_	ion's three largest program services b	•
		ese changes on Sched			, 163 p 110
3		cease conducting, or		n how it conducts, any program	□Yes ☑No
	If "Yes," describe th	ese new services on S	chedule O		
2	_	undertake any signific or 990-EZ?		ng the year which were not listed on	┌ Yes ┌ No

Dart TV	Checklist	of Required	Schedules
4·11 7 3/4	CHECKHSL	vi keuulleu	Scheuules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors? 5	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	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	Yes	
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? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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 quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
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		Νο
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		Νο
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		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		N o
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? If "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)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
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	
		F	orm 990	(2009)

Part V Statements Rega	arding Other IRS Filing	s and Tax Compliance
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			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	_		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
l a	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		No
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
'	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7b		
	file Form 8282?	7c		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	-		
	benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7g		
"	required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	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	-		
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12B			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 38			
ь	Enter the number of voting members that are independent 1b 38			
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		Νo
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 organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
5	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
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		Νο
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
	December of the control of the contr	40-	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		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		
L1	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
L1A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
L2a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	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	
L4	Does the organization have a written document retention and destruction policy?	14	Yes	
L 5	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 a or b, 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		Νo
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			
	List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DE, F IN, IA, KS, KY, LA, ME, MD, MA, M MT, NE, NH, NJ, NM, NY, NV, NC, N	I,MN ND,O	, MS, N H, OK,	10,

- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you make these available Check all that apply

Own website Another's website V Upon request

- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 James Rinefierd 1640 rhode island ave nw

washington, DC 20036 (202) 628-4160

Part VIII 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. Use Schedule J-2 if additional space is needed

- 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. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(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
See add'l data										

1b Total	• • • • • • • • • • • • • • • • • • • •	2,268,157 0	156,436

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization -25

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes," complete Schedule J for such individual</i>	3	Yes	
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	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)			
Name and business address	Description of services	Compensation			
Fund for Public Interest Research 44 Winter Street 4th Floor Boston, MA 02108	member acquisition	2,361,619			
Mal Warwick Assoc 2550 Ninth Street Suite 103 Berkley, CA 94710	Renewals & Mailings	1,033,053			
ROI Solutions Inc 196 Boston Avenue Suite 3000 Medford, MA 02155	Database management	488,724			
Telefund Inc PO Box 2366 Denver, CO 80201	member acquisition	463,800			
Share Group PO Box 55183 Boston, MA 02205	member acquisition	408,164			
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►30					

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Form 99								Page 9
Part V	<u>/1111</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
# # F	1a	Federated cam	paigns 1a					
e Ta	ь	Membership du	es 1b					
કે. a∰	c	Fundraising eve	ents 1c	1,231,420				
<u>ਡ</u> ੁਛ	d	Related organiz	rations 1d					
Contributions, gifts, grants and other similar amounts	e	Government grants	s (contributions) 1e					
er s	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	20,166,815				
^듩	g		butions included in					
멸		lines 1a-1f \$ _	s 1a-1f	.	21,398,235			
<u> </u>	h	Total. A dd illies	5 1d-11		21,330,233			
Program Service Revenue	2a	ADVERTISING		Business Code	106 000		106 000	
ever.	b	ADVERTISING		541,800	196,000		196,000	
or GE								
7 2	ď							
Ŗ	e							
<u>ra</u>	f	All other progra	am service revenue					
Š					105 000			
	д 3		s 2a-2f ome (including dividen		196,000			
			ar amounts)		17,476			17,476
	4		stment of tax-exempt bond	F				
	5	Royalties		• [638,219			638,219
			(ı) Real	(II) Personal				
	6a	Gross Rents	900,591					
	Ь	Less rental expenses						
	C	Rental income or (loss)	900,591					
	d	Net rental inco	me or (loss)		900,591			900,591
	7a	Gross amount	(ı) Securities 2,343	(II) O ther				
	/ a	from sales of assets other	2,313					
	١.	than inventory	2,382					
	Ь	Less cost or other basis and	2,382					
	с	sales expenses Gain or (loss)	-39					
	d	Net gaın or (los	s)	►	-39			-39
4.	8a	Gross income f events (not inc						
Other Revenue		\$,420					
ψ >-		of contributions See Part IV, lin	reported on line 1c)					
Œ.		See rait IV, iiii	a	4,214,921				
∯ E	ь	Less direct ex	penses b	1,438,059				
Ö	С	Net income or ((loss) from fundraising	events 🗠	2,776,862			2,776,862
	9a	Gross income f See Part IV, lin	rom gaming activities					
			a					
	ь		penses b					
	С		(loss) from gaming activ	vities				
	10a	Gross sales of returns and allo		1,397,459				
	ь	Less cost of g	oods sold b	425,137				
	С		(loss) from sales of inve		972,322	972,322		
		Miscellaneous		Business Code	10 172			10 163
	11a	OTHERINCOM	1 E	900,099	18,163			18,163
	b							
	C	Λ II α+b						
	d e	All other revenue Total. Add lines						
		. Julian Add Illies	,		18,163			
	12	Total revenue.	See Instructions	▶↑	26,917,829	972,322	196,000	4,351,272

	990 (2009)				Page 10		
Par	t IX Statement of Functional Expenses						
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	272,011					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22						
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16						
4	Benefits paid to or for members						
5	Compensation of current officers, directors, trustees, and key employees	1,306,078	622,811	508,094	175,173		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$						
7	Other salaries and wages	6,187,337	4,064,543	1,350,494	772,300		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	269,905	, ,		33,826		
9	Other employee benefits	528,604	338,359	 	67,687		
10	Payroll taxes	586,849	368,163	 	74,240		
11	Fees for services (non-employees)	300,043	300,103	144,440	74,240		
a	Management	11 220		10.413	026		
b	Legal	11,238		10,412	826		
C -	Accounting	111,383		' 			
d	Lobbying	250,143	•				
e	Professional fundraising See Part IV, line 17	713,925			713,925		
f	Investment management fees						
g	Other	4,191,232		 	15,721		
12	Advertising and promotion	228,104	•	· · · · · · · · · · · · · · · · · · ·	1,208		
13	Office expenses	2,261,093	1,327,230	165,693	768,170		
14	Information technology						
15	Royalties						
16	Occupancy	1,324,149	862,930	274,615	186,604		
17	Travel	576,700	472,734	25,505	78,461		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials						
19	Conferences, conventions, and meetings	2,452,064	2,390,499	81,848	-20,283		
20	Interest						
21	Payments to affiliates						
22	Depreciation, depletion, and amortization	667,379	399,188	158,510	109,681		
23	Insurance	99,877	7,777	91,723	377		
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)						
а	DIr Mailing/Telemmktg	1,443,910	1,287,953	155,957	_		
b		577,697	508,037	 	29,867		
c	Equip Rental & Maint	382,109		' 	12,869		
d		270,274	229,389	 	27,214		
e		188,899	182,344	 	2,215		
f	All other expenses	114,384	59,229	 	25,377		
25	Total functional expenses. Add lines 1 through 24f	25,015,344		 	3,075,458		
26	Joint costs. Check here ► 🔽 if following SOP 98-2	23,013,344	10,507,030	3,332,030	3,073,430		
20	Complete this line only if the organization reported in column (B) joint costs from a combined educational	2 677 625	2 455 000	222 616	^		
	campaign and fundraising solicitation	3,677,625	3,455,009	222,616	Ü		

Pa	rt X	Balance Sheet						
				(A) Beginning of year		(B) End of year		
	1	Cash—non-interest-bearing		4,000	1	4,000		
	2	Savings and temporary cash investments	3,223,179	2	2,497,782			
	3	Pledges and grants receivable, net	359,729	3	520,418			
	4	Accounts receivable, net			4			
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	es from current and former officers, directors, trustees, key employees, and					
		Schedule L			5			
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ Complete Part II or						
		Schedule L			6			
ssets	7	Notes and loans receivable, net			7			
8	8	Inventories for sale or use		204,891	8	157,203		
⋖	9	Prepaid expenses and deferred charges		701,526	9	280,310		
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	2,748,495					
	ь	Less accumulated depreciation	10b 1,959,255	1,411,642	10c	789,240		
	11	Investments—publicly traded securities			11	2,846,023		
	12	Investments—other securities See Part IV, line 11			12			
	13	Investments—program-related See Part IV, line 11		13				
	14	Intangible assets		14				
	15	Other assets See Part IV, line 11	2,128,555	15	2,901,300			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,033,522	16	9,996,276			
	17	Accounts payable and accrued expenses .		2,132,133	17	2,086,572		
	18	Grants payable			18			
	19	Deferred revenue		396,708	19	529,489		
	20	Tax-exempt bond liabilities			20			
<u>ē</u> ,	21	Escrow or custodial account liability Complete Part IV of Schedule	e D		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
ä		persons Complete Part II of Schedule L		22				
	23	Secured mortgages and notes payable to unrelated third parties			23			
	24	Unsecured notes and loans payable to unrelated third parties			24			
	25	Other liabilities Complete Part X of Schedule D		119,860	25	91,895		
	26	Total liabilities. Add lines 17 through 25		2,648,701	26	2,707,956		
S		Organizations that follow SFAS 117, check here 🕨 🔽 and comp	lete lines 27					
ž		through 29, and lines 33 and 34.		4 000 000		0.000.040		
<u> </u>	27	Unrestricted net assets		4,906,302		6,623,640		
Fund Balance	28	Temporarily restricted net assets		478,519		664,680		
Ĭ	29	Permanently restricted net assets			29			
ヹ		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34	d complete					
٥	30	lines 30 through 34. Capital stock or trust principal, or current funds	_		30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund.			31			
\$ 2	32	Retained earnings, endowment, accumulated income, or other ful			32			
	33	Total net assets or fund balances	iu 3	5,384,821	33	7,288,320		
Net								
l	34	Total liabilities and net assets/fund balances		8,033,522	34	9,996,276		

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

DLN: 93493056004001

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
HUMAN RIGHTS CAMPAIGN INC	
	ED 10424E7

art I-A	Complete if t	<u>ine organization i</u>	<u>s exempt unaer</u>	section 501(c	c) or is a :	section 527 c	organization.

- Provide a description of the organization's direct and indirect political campaign activities in Part IV
- Political expenditures Volunteer hours
- Part I-B Complete if the organization is exempt under section 501(c)(3).
- Enter the amount of any excise tax incurred by the organization under section 4955
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? □ No
- Was a correction made?
- If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527
- exempt funtion activities
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year?
- State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political

contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(e) A mount of political (b) Address (a) Name (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter directly delivered to a separate political organization If none, enter-0-1640 Rhode Island Ave NW hrc PAC 51-0399028 394,242 Washington, DC 20036 1640 Rhode Island Ave NW **HRC Equality Votes** 26-1206256 63,000 Washington, DC 20036 HRC Texas Families PAC 1640 Rhode Island Ave NW 26-2967970 1,709 Washington, DC 20036

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election		
	Check If the filing organization belongs to an affiliated group Check If the filing organization checked box A and "limited control" provisions apply							
<u> </u>	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)					(b) Affiliated Group Totals		
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)					
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)					
c	Total lobbying expenditures (add lines 1a and 18	b)						
d	Other exempt purpose expenditures							
e	Total exempt purpose expenditures (add lines 1	c and 1d)						
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00					
	Over \$17,000,000	\$1,000,000	000,000					
		•						
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)						
h	Subtract line 1g from line 1a If zero or less, enter	er -0-						
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -						
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No		
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five		
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total		
2a	Lobbying non-taxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
c	Total lobbying expenditures							
d	Grassroots non-taxable amount							

	· · · · · · · · · · · · · · · · · · ·								_
Part II-B	Complete if the	organization is e	exempt under	section	501(c)(3)	and has	NOT filed Fo	rm 5768	
	(election under	section 501(h)).							
									_

	· · · · · · · · · · · · · · · · · · ·	(;	a)		(b)	
		Yes	No	/	A moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
					Yes	No
4	Were substantially all (0.0% or more) dues reserved pendedustible by members?			4	l vac l	

			Yes	No
L	Were substantially all (90% or more) dues received nondeductible by members?	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		Νo

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Part I-A, Line 1	Political Campaign Activities	HRC communicated with its membership about federal and state elections in 2009 and in support of endorsed fair-minded candidates HRC paid the administrative expenses of HRC PAC, HRC's federal political action committee, and state PACs where permitted by law

1 |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493056004001

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization
HUMAN RIGHTS CAMPAIGN INC

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

(a) Donor advised funds

(b) Funds and other accounts

Total number at end of year

1 Total number at end of year
2 Aggregate contributions to (during year)
3 Aggregate grants from (during year)
4 Aggregate value at end of year

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

Yes No

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit

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

Purpose(s) of conservation easements held by the organizatio	n (check all	that apply)
Preservation of land for public use (e g , recreation or plea	ısure) Γ	Preservation of an historically importantly land area
Protection of natural habitat	Γ	Preservation of a certified historic structure
Preservation of open space		

- 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year
- a Total number of conservation easements
- **b** Total acreage restricted by conservation easements
- c Number of conservation easements on a certified historic structure included in (a)
- d Number of conservation easements included in (c) acquired after 8/17/06

	Held at the End of the Year
2a	
2b	
2c	
2d	

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

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

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

5 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🛌

- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$
- B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- La If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- **b** If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

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

,

(ii) Assets included in Form 990, Part X

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Ψ _____

Cat No 52283D

83D Schedule D (Form 990) 2009

Part	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easu	res, or Ot	<u>the</u>	Similar A	sset	S (co	ntınued)
3	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	ne fol	owing	that are	e a sıgnıfıca	nt us	e of its collec	tion		
а	Public exhibition		d	Γ	Loan	orexch	hange progra	ams				
b	Scholarly research		e	Γ	Other							
с	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furthe	r the o	organization'	s ex	empt purpose	ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								llar	⊢ γ ₆	es	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answered	l "Ye	es" to Form	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	for c	ontribu	itions c	or other asse	ets n	ot	⊢ γ.	es	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		Г	<u> </u>	Α.	mount	t	
c	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance						-	1f				
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	ie 21?							Гү	es	┌ No
	If "Yes," explain the arrangement in Part XIV									, .		,
	t V Endowment Funds. Complete		n ans	were	ed "Ye	s" to f	Form 990.	Part	TV. line 10.			
	Eliabilitici aliabi complete	(a)Current Year		Prior			o Years Back		hree Years Back	(e) F	our Ye	ars Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment	%										
ь	Permanent endowment ► %											
c	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and a	dministered	for t	:he			
	organization by								_		Yes	No
	(i) unrelated organizations							•		(i)		
	(ii) related organizations								· · · -	(ii)		
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•						•	🗀	b		
	t VI Investments—Land, Buildings					00 D=	art V line :	1.0				
ΓŒΙ	investments—Land, buildings	s, and Equipme	t. J) Cost or		(b)Cost or o		(c) Accumulat	-d		
	Description of investment				is (inves		basis (othe		depreciation		(d) Bo	ok value
	and			-						\perp		
	Buildings		•					,234		\perp		4,234
c l	easehold improvements		•				272	,109	96,	479		175,630
	Equipment						457	,809	319,	863		137,946
a (Other			1				242	1 543			471,430
	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	<u> </u>	•				2,014	,343	1,542, ▶ -	913		471,430

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1.		
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	' '	Cost or end-o	-year market value
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
		1.0	
Part VIII Investments—Program Related. See	e Form 990, Part X, line T		
(a) Description of investment type	(b) Book value		d of valuation -year market value
·	1	Cost or end-o	year market value
		1	
		-	
	+	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			(In) Paralamentari
(a) Descrip	otion		(b) Book value
SECURITY DEPOSITS			71,000
due from related organizations & HRC Foundation			2,825,719
Accrued Interest			4,581
Total. (Column (b) should equal Form 990. Part X. col.(B) line 1	5.)		2,901.300
			2,901,300
Part X Other Liabilities. See Form 990, Part X	, line 25.		2,901,300
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability			2,901,300
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25.		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SECURITY DEPOSITS	(b) A mount		2,901,300
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		2,901,300

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,917,829
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	25,015,344
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,902,485
4	Net unrealized gains (losses) on investments	4	1,010
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	4
9	Total adjustments (net) Add lines 4 - 8	9	1,014
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,903,499
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	29,750,954
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 385,000		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	2,833,127
3	Subtract line 2e from line 1	3	26,917,827
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	2
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	26,917,829
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	27,801,837
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	2,786,498
3	Subtract line 2e from line 1	3	25,015,339
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	5
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	25,015,344
Dar	TATIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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

Ident if ier	Return Reference	Explanation
Part X	Description of Uncertain Tax Positions Under FIN 48	In June 2006, the Financial Accounting Standards Board (FASB) released FASB ASC 740 10, Income Taxes, that provides guidance for reporting uncertainty in income taxes. For the year-ended March 31, 2010, HRC and the Foundation have documented their consideration of FASB ASC 740-10 and determined that no material uncertain tax positions qualify for either recognition or disclosure in the combined financial statements.
Part XI, Line 8 - Other Adjustments		Rounding 4
		PART XII, LINE 2D - OTHER ADJUSTMENTS EXPENSES RELATED TO SPECIAL EVENTS netted against Revenue on Page 9 Part VIII, line 8B 1,438,059 Cost of goods sold netted against sales on Part VIII, Line 10b 425,137 rEVENUE OF 527 SEGREGATED FUND included in financial statements but excluded on Form 990 583,921 PART XIII, LINE 2D - OTHER ADJUSTMENTS EXPENSES RELATED TO SPECIAL EVENTS netted against Revenue on Page 9 Part VIII, line 8B 1,438,059 Cost of goods sold netted against sales on page 9, Part VIII, Line 10b 425,137 Expenses OF 527 SEGREGATED FUND included in financial statements but excluded on Form 990 538,302

As Filed Data -

DLN: 93493056004001

SCHEDULE G (Form 990 or 990-EZ)

Phone solicitations

In-person solicitations

Department of the Treasury

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.

OMB No. 1545-0047

Open to Public

Internal Revenue Service	Attach to Form 990 or Form 990-EZ. F See separate instructions.	Inspection
Name of the organization		Employer identification number
HUMAN RIGHTS CAMPA	AIGN INC	
		52-1243457

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Internet and e-mail solicitations

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

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did 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				
Mal Warwick Associates	Direct Mail		No	2,375,751	184,875	2,190,876	
MR Strategy Services	Email Fundraising		No	1,700,573	289,309	1,411,264	
Share Group	Member A cquisition		No	685,525	408,164	277,361	
Donor Services Group	Member A cquisition		No	482,798	403,512	79,286	
Telefund Inc	Member A cquisition		No	404,061	463,800	-59,739	
Total			>	5,648,708	1,749,660	3,899,048	

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

AL,AK,AZ,AK,CA,CO,CT,DC,DE,FL,GA,HI,ID,IL,ID,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,MT,NE,NV,NH,NJ,NM,NY,NC,ND.OH.OK.OR.PA. RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY

Special fundraising events

Pa	rt II	Fundraising Events. Commore than \$15,000 on Form					report	:ed
			(a) Event #1 Dinner (event type)	(b) Event #2 Dinner (event type)	(c) O ther Events 21 (total number)	(d) Tot (Add col		
₽	1	Gross receipts	626,660	1,126,640			5,44	6,340
Revenue	2	Less Charitable contributions	70,380	236,215	924,825		1,23	1,420
<u></u>	3	Gross income (line 1 minus line 2)	556,280	890,425	2,768,215		4,21	4,920
	4	Cash prizes						
မွာ	5	Non-cash prizes						
Expenses	6	Rent/facility costs	9,075	113,590	231,128		35	3,793
	7	Food and beverages	75,754	112,831	437,163		62	5,748
Direct	8	Entertainment						
莅	9	Other direct expenses .	17,693	52,636	388,189		45	8,518
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)			1,43	8,059
	11	Net income summary Combine li	nes 3, column d, and line	10			2,77	6,861
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii	rganızatıon answered ne 6a.	"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col col		
	1	Gross revenue						
မှ လူ	2	Cash prizes						
Expenses	3	Non-cash prizes						
Direct E	4	Rent/facility costs						
ă	5	Other direct expenses						
	6	Volunteer labor	Г Yes	Г Yes	┌ Yes			
	7	Direct expense summary Add line	s 2 through 5 ın column (d)				
	8	Net gaming income summary Com	bine lines 1, column d, a	nd line 7	<u> </u>		Yes	No
9 a b	Is t	er the state(s) in which the organiza he organization licensed to operate No," Explain			 .	· 9a		
10a b		re any of the organization's gaming Yes," Explain	licenses revoked, susper	nded or terminated during	the tax year?	10a		
11 12	Is t	es the organization operate gaming he organization a grantor, beneficia ned to administer charitable gaming	ry or trustee of a trust or	a member of a partnersh	ip or other entity	12		
					Schedule G (Form 9	ישט סר ששט-	EZ) 20	UY

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
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 ▶ \$	1	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

General Information on Grants and Assistance

Schedule I (Form 990)

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

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

OMB No 1545-0047

DLN: 93493056004001

Inspection

Department of the Treasury Internal Revenue Service

Seattle, WA 98102

Name of the organization HUMAN RIGHTS CAMPAIGN INC ► Attach to Form 990 Employer identification number

52-1243457

Part I delicial Illion	nation on Grants	and Assistance					
Does the organization ma the selection criteria used	d to award the grants o	orassistance?					∨ Yes
2 Describe in Part IV the or	rganization's procedur	es for monitoring the use	e of grant funds in the U	Inited States			
Form 990, Part I	V, line 21 for any r	Governments and received of additional space	d more than \$5,000.	Check this box if n	o one recipient rece	ved more than \$5,0	00. Use
(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
Courage Campaign Issues 7119 W Sunset Blvd No 195 Los Angeles, CA 90046	261398362	501 (c)(4)	10,000				general program support
Maine Freedom to Marry No On 1Protect Maine Equality PO Box 8780 Portland, ME 04104	270327324	501 (c)(4)	165,400				Ballot Measure Campaign
Washington Families Standing TogetherPO Box 12216	270194158	501 (c)(4)	78,500				Ballot Measure Campaign

2	Enter total	number of	rsection	501(c)(3) and	government	organizations	

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

Part III	Grants and Other Assista	nce to Individ	uals in the United State	s. Complete if the organization	answered	"Yes" to Form 990,	Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional sp	ace 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

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 HRC field staff are in regular contact with organizations receiving contributions or other assistance from HRC HRC staff provide strategic advice to contribution recipients and work with them before and after financial support is provided to develop plans consistent with HRC's mission in support of lesbian, gay, bisexual and transgender equal rights All contributions and recipients are reviewed in advance by HRC's general counsel Expenditures by ballot measure committee recipients are disclosed pursuant to state or local law and periodically reviewed by HRC's general counsel

DLN: 93493056004001

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

Open to Public

onal Novolido Colvido	FATTACH TO FORM 990. F See separate histructions.		
Name of the organization HUMAN RIGHTS CAMPAIGN INC		Employer identif	ication number
		52-1243457	
Part I Questions Regarding C	ompensation		

La Check the appropiate box(as) 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 reliable organization pregarding these terms 990, Part VII, Section A, line 1a complete Part III to provide any reliable amounts for each item in Part III Prist-class or charter travel Housing allowance or residence for personal use Part III to provide any reliable organization payment or reliable with the companions Payments for business use of personal residence Discretionary spending account Personal services (e.g., maid, chauffeur, cheft) b If any of the boxes in line 1a arc 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 of the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, frustrees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Ves V						Yes	Νo
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, chartur, cheft) b If any of the boxes in line 1 a 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? 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 7 Compensation committee Wintten employment contract 1 Independent compensation consultant Compensation survey or study 7 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 or a related organization 8 Receive a severance payment from, a supplemental nonqualified retirement plan? 9 Participate in, or receive payment from, an equity-based compensation arrangement? 1 Participate in, or receive payment from, an equity-based compensation arrangement? 1 Participate in, or receive payment from, an equity-based compensation arrangement? 1 Participate in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of 2 Appreciate organization? 3 Appreciated organization? 4 Proyers, 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 Participate	1a						
Tax idemnification and gross-up payments		First-class or charter travel	Γ	Housing allowance or residence for personal use			
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 Ves 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 Ves 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 7 Compensation committee 8 Were any of other organizations 9 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 9 Participate in, or receive payment from, an equity-based compensation arrangement? 10 Participate in, or receive payment from, an equity-based compensation arrangement? 10 Participate in, or receive payment from, an equity-based compensation pay or accrue any compensation or any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 10 Propersons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of 10 Any related organization? 11 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 12 The organization? 13 Any related organization? 14 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 15 Any related organization? 16 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 17 For persons listed in Form 990, Part VII, paid or accurate p		Travel for companions	\sqcap	Payments for business use of personal residence			
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 If Compensation committee 7 Written employment contract 1 Independent compensation consultant 2 Compensation survey or study 3 Form 990 of other organizations 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 a Receive a severance payment or change-of-control payment? 4 Participate in, or receive payment from, as upplemental nonqualified retirement plan? 4 Participate in, or receive payment from, an equity-based compensation arrangement? 1 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 3 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 net earnings of a The organization? 5 Any related organization? 1 If "Yes," to line 5a or 5b, describe in Part III 7 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 a The organization? 5 Any related organization? 1 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 8 Were any amounts repo		Tax idemnification and gross-up payments	\sqcap	Health or social club dues or initiation fees			
reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain 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 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 organization organization committee organization organization? Did the organization? 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 organization organization organization organization? The organization? For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed organization? For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide organization organizatio		Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2	b				1b	Yes	
organization's CEO/Executive Director Check all that apply \[\times \) Compensation committee \[\times \) Written employment contract \[\times \) Independent compensation consultant \[\times \) Form 990 of other organizations \[\times \) 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 a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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 a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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 a The organization? b Any related organization? 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 a The organization? b Any related organization? 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 Per 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 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 8	2				2	Yes	
Independent compensation consultant Form 990 of other organizations 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 Receive a severance payment or change-of-control payment? Ab Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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 a The organization? b Any related organization? for 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 a The organization? b Any related organization? 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 a The organization? 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 For persons listed 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 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	3	organization's CEO/Executive Director Check all that	: appl	y			
Form 990 of other organizations A pproval by the board or compensation committee 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 Receive a severance payment or change-of-control payment? A participate in, or receive payment from, a supplemental nonqualified retirement plan? A participate in, or receive payment from, an equity-based compensation arrangement? 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. 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 The organization? If "Yes," to line 5a or 5b, describe in Part III 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 The organization? If "Yes," to line 6a or 6b, describe in Part III 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations		<u> </u>	<u>'</u>				
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 a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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 a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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 a The organization? 6a have related organization? 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 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 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			•	·			
a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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 a The organization? b Any related organization? 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 a The organization? b Any related organization? 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 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 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations		Form 990 of other organizations	~	Approval by the board or compensation committee			
b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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 a The organization? If "Yes," to line 5a or 5b, describe in Part III 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 a The organization? a The organization? b Any related organization? If "Yes," to line 6a or 6b, describe in Part III 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 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 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	4		rt VI	I, Section A, line 1a with respect to the filing organization			
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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. 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 a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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 a The organization? b Any related organization? fi "Yes," to line 6a or 6b, describe in Part III 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	ь	Participate in, or receive payment from, a supplementa	al non	qualified retirement plan?	4b		Νo
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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 a The organization? b Any related organization? 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 a The organization? 6 Any related organization? 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 8 Were any amounts reported in Form 990, Part VII, paid or accurred 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations		If "Yes" to any of lines 4a-c, list the persons and prov	ıde th	e applicable amounts for each item in Part III			
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b Any related organization? 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 a The organization? b Any related organization? 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	5		ne 1a,	did the organization pay or accrue any			
If "Yes," to line 5a or 5b, describe in Part III 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 The organization? Any related organization? If "Yes," to line 6a or 6b, describe in Part III 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	а	The organization?			5a		Νo
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 The organization? Any related organization? If "Yes," to line 6a or 6b, describe in Part III 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	b	Any related organization?			5b		Νo
compensation contingent on the net earnings of a The organization? b Any related organization? 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 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 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations		If "Yes," to line 5a or 5b, describe in Part III					
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	6	· · · · · · · · · · · · · · · · · · ·	ne 1a,	did the organization pay or accrue any			
If "Yes," to line 6a or 6b, describe in Part III 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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	а	The organization?			6a		Νo
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 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 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	Ь	Any related organization?			6b		Νo
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subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	7	·		· · · · · · · · · · · · · · · · · · ·	7		No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	8	subject to the initial contract exception described in R		·	8		No
	9		ebutt	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	'	(B) Breakdown of W-2 and/or 1099-MISC compensation		(C) Retirement and	(D) Nontaxable	(E) Total of columns		
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
JOSEPH SOLMONESE	(ı) (ıı)	288,190 0	I	0 0	10,707	5,069 0		(
CATHY NELSON	(I) (II)	257,150 0	0	0 0	9,687	5,069 0	271,906	
SUSANNE SALKIND	(1) (11)	192,141	0 () C	7,688	7,469 0	207,298	
JAMES RINEFIERD	(ı) (ıı)	156,705 0	0	0 0	6,256	6,252 0	169,213	
ROBERT FALK	(ı) (ıı)	140,630	0	0 0	5,565	5,030 0	151,225	
DAVID SMITH	(ı) (ıı)	231,183	0	0 0	8,778	5,069 0	245,030	
MARTIN ROUSE	(ı) (ıı)	172,921 0	0 (0 0	6,641	5,069 0	184,631	
ALLISON HERWITT	(ı) (ıı)	164,854 0	0	0 0	6,661	7,465 0	178,980	
ELIZABETH PURSELL	(ı) (ıı)	139,696	0	0 0	5,507	5,027 0	7 150,230	
ANDREA GREEN	(ı) (ıı)	122,940	0 C	0 0	4,933	6,210		
								
	 '	-		+	+ +	 I	-	

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	Ret urn Ref erence	Explanation
	•	HRC provided first class air travel on occasion for President Joe Solmonese, as permitted by policy adopted by the HRC Board. The president's schedule often requires last minute changes in travel plans, and therefore fully refundable tickets are frequently used. First class tickets were occasionally purchased in situations in which fully refundable coach tickets were comparably priced to first class tickets.
Supplemental Information		THE HUMAN RIGHTS CAMPAIGN (HRC) AND HUMAN RIGHTS CAMPAIGN FOUNDATION(HRCF) HAVE ENTERED INTO A COST SHARING ARRANGEMENT UNDER WHICH HRCF REIMBURSES HRC FOR HRCF'S ALLOCABLE SHARE OF THE COMPENSATION OF CERTAIN HRC EMPLOYEES PURSUANT TO THIS AGREEMENT, HRCF REIMBURSED HRC FOR THE FOLLOWING PORTION OF TOTAL COMPENSATION PAID BY HRC AS FOLLOWS JOSEPH SOLMONESE (OFFICER) 32,541 SUSANNE SALKIND (OFFICER) 12,714 JAMES RINEFIERD (OFFICER) 41,694 ROBERT FALK (OFFICER) 37,262 ELIZABETH PURSELL(OFFICER) 150,230 ANDREA GREEN (FORMER OFFICER) 33,038

Schedule J (Form 990) 2009

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Name of the organization HUMAN RIGHTS CAMPAIGN INC **Employer identification number**

52-1243457

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 1		Under the HRC bylaws, the Executive Committee "shall meet as needed and on an emergency basis and shall exercise, between Board Meetings, all the powers and duties of the Board, except the election of Directors to fill vacancies on the Board, the removal of Directors from the Board, and the amendment of the By-Laws" The bylaws provide that The Co-Chairs of the board appoint the Executive Committee, "which shall include the Co-Chairs of the Board of Directors, the Co-Chairs of the Board of Governors, the Co-Chairs of each Board Committee and up to four (4) members at large During the operating years of a strategic planning process, the Executive Committee shall include the Co-Chairs of that Committee The Co-Chairs may also appoint task force or special project chair(s) to serve on the Executive Committee for the duration of their assignments" Under these provisions, all members of the Executive Committee must be members of the board
Form 990, Part VI, Section B, Inne 11		The form 990 is prepared by the outside accountants and is reviewed by senior management, the audit and finance committees review the 990 prior to filing. A copy is provided electronically to all board members before the 990 is filed.
Form 990, Part VI, Section B, Inne 12c		The organization annually sends out to its officers and directors the conflicts of interest policy and requests a signed disclosure form from each covered individual. Any disclosed conflict is reviewed by the general counsel. If a conflict does exist on a specific issue, meeting minutes would reflect the board action taken to clear the conflict, either by having the affected board member or officer recuse themselves from the discussion or vote or remove themselves from all deliberations.
Form 990, Part VI, Section B, Ine 15		In 2009, prior to the start of the new fiscal year, the board appointed a committee of independent directors to look at the president's compensation before his contract was renewed. In reviewing compensation, the committee reviewed salary surveys of comparable non-profit organizations in the Washington DC area and data available from the 990s of other comparable non-profits. The committee deliberated independently of the president and minutes of that meeting were taken and ratified by the committee. The committee's findings were presented to the full board, which adopted its findings in March of 2009. The same committee that examined the president's compensation also looked at the current compensation of the organization's officers and key employees. The same set of materials and procedures were used to assess the compensation of the officers and key employees, and minutes were kept of the meeting. The findings were presented to the full board, which adopted its findings in March of 2009. Based on that review, the Board approved a two year contract for the president. As a result of changes in the economy, all compensation for other officers and key employees was frozen in FY 2010. Consequently, the organization believes that the 2009 analysis remains applicable in 2010.
Form 990, Part VI, Section C, Inne 19		No documents available to the public
Form 990, Part VII		THE HUMAN RIGHTS CAMPAIGN (HRC) AND HUMAN RIGHTS CAMPAIGN FOUNDATION(HRCF) HAVE ENTERED INTO A COST-SHARING ARRANGEMENT UNDER WHICH HRCF REIMBURSES HRC FOR HRCF'S ALLOCABLE SHARE OF THE COMPENSATION OF CERTAIN HRC EMPLOYEES PURSUANT TO THIS AGREEMENT, HRCF REIMBURSED HRC FOR THE FOLLOWING PORTION OF TOTAL COMPENSATION PAID BY HRC AS FOLLOWS JOSEPH SOLMONESE (OFFICER) 32,541 SUSANNE SALKIND (OFFICER) 12,714 JAMES RINEFIERD (OFFICER) 41,694 ROBERT FALK (OFFICER) 37,262 ELIZABETH PURSELL (OFFICER) 150,230 ANDREA GREEN (FORMER OFFICER) 33,038
		see the Instructions for Form 990 Cat. No. 51.056K Schedule O (Form 990) 2005

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493056004001

SCHEDULE R (Form 990)

Department of the Treasury

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.

2009

OMB No 1545-0047

Open to Public Inspection

Name of the organization
HUMAN RIGHTS CAMPAIGN INC

Employer identification number

52-1243457

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

(a) Name, address, and EIN of disregarded entity

Primary activity

(c)
Legal domicile (state
or foreign country)

(d) Total income (e) End-of-year assets (f) Direct controlling entity

Part II

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

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country)

Exempt Code section

Public charity status (if section 501(c)(3))

Direct controlling entity

See Additional Data Table

(j)

General or

managing

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

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

al (d)
cile Direct controlling
or entity
gn

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

hedule K-1 partner? form 1065)

Yes No

Yes

No

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

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

(3)

(4)

(5)

(6)

Cire	dule k (Form 990) 2009			Pag	ge 3
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line	e 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	[1a		No
b	Gift, grant, or capital contribution to other organization(s)	;	1b		No
c	Gift, grant, or capital contribution from other organization(s)	[1c		No
d	Loans or loan guarantees to or for other organization(s)	[1d		No
e	Loans or loan guarantees by other organization(s)	[1e		No
f	Sale of assets to other organization(s)		1f		No
g	Purchase of assets from other organization(s)	;	1g		No
h	Exchange of assets	[1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)		1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)		1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	[1k	Yes	
1	Performance of services or membership or fundraising solicitations by other organization(s)		1 I		No
m	Sharing of facilities, equipment, mailing lists, or other assets	;	1m	Yes	
n	Sharing of paid employees	[-	1n		No
o	Reimbursement paid to other organization for expenses		10		No
р	Reimbursement paid by other organization for expenses	[1p	Yes	
q	O ther transfer of cash or property to other organization(s)		1q		No
r	O ther transfer of cash or property from other organization(s)	ٳ	1r		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 a	and transaction thresholds			
	(a)	(b) Transaction	(6	:)	
	Name of other organization	type(a-r) Am	ount	ınvolve	∌d
-	ee Additional Data Table				
2)					

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

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Software ID: Software Version:

EIN: 52-1243457

Name: HUMAN RIGHTS CAMPAIGN INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(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 501(c)(3))	(f) Direct Controlling Entity
HRC PAC	political work in federal elections	DC	527	N/A	Human Rights Campaign
1640 Rhode Island Ave NW Washington, DC20036 51-0399028					
HRC Equality Votes	political work in non- federal elections	DC	527	N/A	Human Rights Campaign
1640 Rhode Island Ave NW Washington, DC20036 26-1206256					
HRC Arizona Families PAC	political work in Arizona elections	DC	527	N/A	Human Rights Campaign
1640 Rhode Island Ave NW Washington, DC20036 26-2968262					
HRC Minnesota PAC	political work in Minnesota elections	DC	527	N/A	Human Rights Campaign
1640 Rhode Island Ave NW Washington, DC20036 _20-5337346					
HRC New York PAC	political work in New York elections	DC	527	N/A	Human Rights Campaign
1640 Rhode Island Ave NW Washington, DC20036 26-1317409					
HRC Ohio Families PAC	political work in O hio elections	DC	527	N/A	Human Rights Campaign
1640 Rhode Island Ave NW Washington, DC20036 _26-1318248					
HRC Texas Families PAC	political work in Texas elections	DC	527	N/A	Human Rights Campaign
1640 Rhode Island Ave NW Washington, DC20036 26-2967970					, ,
Pennsylvania Families PAC	political work in Pennsylvania elections	DC	527	N/A	Human Rights Campaign
1640 Rhode Island Ave NW Washington, DC20036 75-3218698					

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

roill	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)
(1)	HRC PAC	к	138,072
(2)	HRC Equality Votes	К	5,106
(3)	HRC Arizona Families PAC	К	5,106
(4)	HRC Minnesota PAC	К	5,106
(5)	HRC New York PAC	К	5,106
(6)	HRC Ohio Families PAC	К	5,106
(7)	HRC Texas Families PAC	К	5,106
(8)	Pennsylvania Families PAC	К	5,106
(9)	HRC PAC	М	10,828
(10)	HRC Equality Votes	М	616
(11)	HRC Arizona Families PAC	М	616
(12)	HRC Minnesota PAC	М	616
(13)	HRC New York PAC	М	616
(14)	HRC Ohio Families PAC	М	616
(15)	HRC Texas Families PAC	М	616
(16)	Pennsylvania Families PAC	М	616
(17)	HRC PAC	Р	4,416
(18)	HRC Equality Votes	Р	43,351
(19)	HRC Minnesota PAC	Р	377
(20)	HRC New York PAC	Р	25

Additional Data

Software ID: Software Version:

EIN: 52-1243457

Name: HUMAN RIGHTS CAMPAIGN INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program	ı services			
(Code) (Expenses \$	2,167,767 including grants of \$) (Revenue \$)
Communications &	k Media			

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion (that a		')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation from the organization and related organizations	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		
LACEY ALL DIRECTOR	10 00	Х	•					0	0	0	
JOHN BARRY DIRECTOR	10 00	x						0	0	0	
BRUCE BASTIAN DIRECTOR	10 00	X						0	0	0	
TERRENCE BEAN DIRECTOR	10 00	Х						0	0	0	
DAVID BECKWITH DIRECTOR	10 00	Х						0	0	0	
LESLIE BENDTSEN DIRECTOR	10 00	X						0	0	0	
KENNETH BRITT CO-CHAIR	25 00	X						0	0	0	
STEPHANIE CARREON DIRECTOR	10 00	Х						0	0	0	
DANIEL COCHRAN DIRECTOR	10 00	X						0	0	0	
JANE DAROFF DIRECTOR	10 00	Χ						0	0	0	
TIMOTHY DOWNING DIRECTOR	10 00	Χ						0	0	0	
LINDA ELLIOTT DIRECTOR	10 00	X						0	0	0	
ANNE FAY DIRECTOR	10 00	X						0	0	0	
JODY GATES DIRECTOR	10 00	Χ						0	0	0	
KIRK HAMILL DIRECTOR	10 00	Χ						0	0	0	
SANDRA HARTNESS DIRECTOR	15 00	Χ						0	0	0	
MICHAEL HOLLOMAN DIRECTOR	10 00	Χ						0	0	0	
JOHN ISA DIRECTOR	10 00	Χ						0	0	0	
LEEANN JONES DIRECTOR	10 00	X						0	0	0	
BARRY KARAS DIRECTOR	10 00	Χ						0	0	0	
TOM KOVACH DIRECTOR	10 00	X						0	0	0	
JANI LOPEZ DIRECTOR	15 00	X						0	0	0	
ANTON MACK DIRECTOR	10 00	X						0	0	0	
JONI MADISON DIRECTOR	10 00	Х						0	0	0	
MICHAEL PALMER DIRECTOR	10 00	X						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F)										
(A) Name and Title	(B) A verage hours		tion (check pply)	all		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee <i>o</i> r director	Institutional Trustee	Key employee Officei	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	
TERRY PENROD DIRECTOR	10 00	Х					0	0	0	
DANA PERLMAN DIRECTOR	15 00	X					0	0	0	
STEVE REID DIRECTOR	10 00	Х					0	0	0	
HENRY ROBIN DIRECTOR	15 00	Х					0	0	0	
MIRIAN SAEZ DIRECTOR	10 00	X					0	0	0	
CATHERINE SCALISE DIRECTOR	10 00	X					0	0	0	
LINDA SCAPAROTTI DIRECTOR	10 00	Х					0	0	0	
MEGHAN STABLER DIRECTOR	10 00	X					0	0	0	
REBECCA TILLET CO-CHAIR	25 00	Х					0	0	0	
ALAN UPHOLD DIRECTOR	10 00	X			0	0	0			
DAVID WILSON DIRECTOR	15 00	X	Х		0	0	0			
FRANK WOO DIRECTOR	10 00	X					0	0	0	
LISA ZELLNER DIRECTOR	15 00	X					0	0	0	
JOSEPH SOLMONESE PRESIDENT	37 50			Χ			288,190	0	15,776	
CATHY NELSON ASST VICE PRESIDENT	37 50			X			257,150	0	14,756	
SUSANNE SALKIND VICE PRESIDENT	37 50			X			192,141	0	15,157	
JAMES RINEFIERD TREASURER	37 50			Χ			156,705	0	12,508	
ROBERT FALK SECRETARY	37 50			Χ			140,630	0	10,595	
DAVID SMITH VP PROGRAMS	37 50			Х			231,183	0	13,847	
MARTIN ROUSE NATIONAL FIELD DIRECTOR	37 50			Х			172,921	0	11,710	
ALLISON HERWITT LEGISLATIVE DIRECTOR	37 50				Х		164,854	0	14,126	
CHRISTOPHER SPERON DEVELOPMENT DIRECTOR	37 50				Х		136,959	0	10,517	
ELIZABETH PURSELL VP PUBLIC EDUC & OUTREACH	37 50				Х		139,696	0	10,534	
HALCYON MATHIS DIRECTOR OF EXEC OPERATIONS	37 50				Х		125,882	0	5,192	
ANN CROWLEY MEMBERSHIP DIRECTOR	37 50				Х		138,906	0	10,575	

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

(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)						(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
ANDREA GREEN FORMER TREASURER	37 50	•		•		•	Х	122,940	0	11,14

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
DIr Maılıng/Telemmktg	1,443,910	1,287,953	155,957	
DATA PROCESSING	577,697	508,037	39,793	29,867
Equip Rental & Maint	382,109	199,751	169,489	12,869
PRemiums - development	270,274	229,389	13,671	27,214
Dues and subscriptions	188,899	182,344	4,340	2,215