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DLN: 93493035007325

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 cal	endar year, or tax year beginning 10-01-2013 , 2013, and ending 09	-30-2014			
		pplicable	C Name of organization		D Emplo	yer ide	ntification number
	ress ch		Native American Rights Fund Inc		84-06	51187	6
— _{Nar}	me cha	inge	Doing Business As			,110,	o .
— _{Init}	al retu	ırn	Number and street (or P O box if mail is not delivered to street address) Room,	/surto			
– _{Ter}	mınate	·d	1506 Broadway	suite	E Telepho	one num	ber
_	ended		Suite City or town, state or province, country, and ZIP or foreign postal code		(303)	447-8	3760
_		n pending	Boulder, CO 80302				
Whi	Jicatioi	i penung		1			\$ 7,917,276
			F Name and address of principal officer John Echohawk		Is this a group subordinates?	return	for
			1506 Broadway		3 4 5 7 4 111 4 1 5 1		,,
			Boulder, CO 80302		Are all subordi	nates	┌ Yes ┌ No
Ta:	x-exem	npt status	✓ 501(c)(3)		ıncluded? If "No." attach	a list	(see instructions)
			VW NARF ORG				
				H(c)	Group exempt	ion nui	mber 🟲
			✓ Corporation Trust Association Other ►	L Yea	r of formation 19	70 M	State of legal domicile DC
Pa	rt I	Sum	mary				
			escribe the organization's mission or most significant activities RUCT THE FDNS NECESSARY TO EMPOWER TRIBES SO THEY CA	N CONTIN			DING TO THEIR
			TRADITIONS, ENFORCE THEIR TREATY RIGHTS, & PROTECT THE			4000	RDING TO THEIR
Governance	:						
₫	.						
Ē.	2	Check tl	his box 🛌 if the organization discontinued its operations or dispose	d of more t	han 25% of its	net as	sets
ŝ	-	oncer u	ins box F The organization discontinued its operations of dispose	a or more c	11411 23 70 01 103	1100 01	
85	3	Number	of voting members of the governing body (Part VI, line 1a)			3	13
Activities &	4	Number	of independent voting members of the governing body (Part VI, line 1 $$.b)		4	13
₹ **	5	Total nu	mber of individuals employed in calendar year 2013 (Part V, line 2a)			5	55
ĕ	6	Total nu	mber of volunteers (estimate if necessary)			6	16
	1		related business revenue from Part VIII, column (C), line 12			7a	0
	b	Net unre	elated business taxable income from Form 990-T, line 34	<u> </u>		7b	
					Prior Year		Current Year
a)	8	Contributions and grants (Part VIII, line 1h)			10,173,19		4,784,849
Rayenue	9		am service revenue (Part VIII, line 2g)	•	1,277,395		1,306,465
Ž.	10 11		tment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	·	336,232 21,254		559,688
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), l	ine —	21,.	254	28,666
					11,808,	071	6,679,668
	13	Grant	s and similar amounts paid (Part IX, column (A), lines 1–3)		1,708,6	673	1,441,642
	14	Benef	ts paid to or for members (Part IX, column (A), line 4)			0	0
Ø	15	Saları 5–10	es, other compensation, employee benefits (Part IX, column (A), line:	s	5,029,0	025	5,337,910
Expenses	16a		ssional fundraising fees (Part IX, column (A), line 11e)	. —		000	29,098
÷	ь		indraising expenses (Part IX, column (D), line 25) ▶1,249,301				
Ш	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	· .	2,610,	750	3,290,040
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25		9,372,		10,098,690
	19		ue less expenses Subtract line 18 from line 12		2,435,6	_	-3,419,022
ጅኞ					inning of Curre		End of Year
Net Assets or Fund Balances					Year		
2.00 2.00 2.00	20		assets (Part X, line 16)	·	20,507,		17,121,075
2 E	21		liabilities (Part X, line 26)	·	1,419,4		1,402,735
	22		ssets or fund balances Subtract line 21 from line 20		19,087,	742	15,718,340
	rt II	_	nature Block perjury, I declare that I have examined this return, including accomp	anung cah	adulas and sta	tomon	to and to the best of
			belief, it is true, correct, and complete Declaration of preparer (other				
			nowledge		•		
		Τ.					
		****	*** ature of officer		2015-02-16 Date		
Sign Here		' '			Date		
	u		ael Kennedy Chief Financial Officer e or print name and title				
		1	Print/Type preparer's name Preparer's signature	Date	Check I if	PTIN	
Paid	t	F	Rita F Worster CPA		self-employed	P0029	0681
	a pare		Firm's name		Firm's EIN 🟲		
	On		Firm's address F 111 South Tejon Suite 800		Phone no (303	3) 447-8	760
-	· • • • • •	• y			1		

Colorado Springs, CO 809039848

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

✓ Yes No

4d

4e

Other program services (Describe in Schedule O)

Total program service expenses >

including grants of \$

7,988,624

) (Revenue \$

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	140
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? 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 11b and 19?	20	Yes	

Par	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	.l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 63		1 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
	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 (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		שכ		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
А	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		140
u	74			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
	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		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		_	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo $\hbox{supervision of officers, directors or trustees, or key employees to a management company or other person? \quad .}$ Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο Νo Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes **b** Each committee with authority to act on behalf of the governing body? Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Νo 10a Did the organization have local chapters, branches, or affiliates? **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Yes 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 Yes 14 Did the organization have a written document retention and destruction policy? 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Yes Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the **Section C. Disclosure** List the States with which a copy of this Form 990 is required to be filed►AL , AK , AR , CA , CO , CT , FL , GA , HI , ID , IL , IN , IA , KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, VT, VA, WA, WV, WI Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►NATIVE AMERICAN RIGHTS FUND 1506 BROADWAY BOULDER, CO 80302 (303) 447-8760

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) GERALD DANFORTH	1 0									
CHAIRMAN	0 0	Х						0	0	C
(2) NATASHA V SINGH	10			\vdash						
VICE-CHAIRMAN		х						0	0	C
(3) VIRGINIA CROSS	0 0									
•		х						0	0	C
BOARD MEMBER	0.0									
(4) BARBARA SMITH	1 0	х						0	0	C
BOARD MEMBER	0 0									
(5) MARK MACARRO	1 0	x						0	0	C
BOARD MEMBER	0 0	^						Ŭ	ŭ	,
(6) BUFORD L ROLIN	1 0	_						0	0	
BOARD MEMBER	0 0	Х						U	U	C
(7) MOSES K N HAIA III	1 0									
BOARD MEMBER	0 0	Х						0	0	C
(8) JULIE ROBERTS-HYSLOP	1 0									
		Х						0	0	C
BOARD MEMBER (9) GARY HAYES	0 0									
		х						0	0	C
BOARD MEMBER	0 0									
(10) STEPHEN R LEWIS	1 0	Х						0	0	C
BOARD MEMBER	0 0									
(11) PETER M PINO	1 0	X						0	0	C
BOARD MEMBER	0 0	^						Ŭ	Ŭ	,
(12) TEX G HALL	1 0	· ·							0	
BOARD MEMBER	0 0	Х						0	0	C
(13) LARRY OLINGER	10									
BOARD MEMBER	0 0	X						0	0	C
(14) ROBERT MCGHEE	10									
BOARD MEMBER		Х						0	0	C
(15) JOHN ECHOHAWK	0 0									
` '				х				202,343	0	36,909
EXECUTIVE DIRECTOR (16) MICHAEL KENNEDY	40.0									
	40 0			х				114,898	0	25,544
CHIEF FINANCIAL OFFICER	0 0									
(17) RAY RAMIREZ	40 0			x				85,528	0	16,133
CORPORATE SECRETARY	0.0	1	1	ı ^`	1	ı	1	1 55,520	V	10,100

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

(A) Name and Title	(B) Average hours per week (list any hours for related	more pers and	than on is	one bot rect	note boo	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations	Estil amount compe fror	F) mated of other nsation the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	(W- 2/1099- MISC)	and r	ization elated zations
(18) MORGAN O'BRIEN	40 0			x				111,874	,	0	35,482
DEVELOPMENT DIRECTOR (19) MELODY MCCOY	0 0 40 0				-		+			<u> </u>	
LITIGATION MGMT COMMITTEE	0 0			Х				169,203	3	o	43,599
(20) KIM GOTTSCHALK	40 0									1	
LITIGATION MGMT COMMITTEE	0 0			Х				174,759		0	32,761
(21) NATALIE LANDRETH LITIGATION MGMT COMMITTEE	40 0			х				135,628	3	o	24,356
(22) DON WHARTON	40 0					х		172,102	2	0	28,997
ATTORNEY (23) STEVEN MOORE	0 0 40 0					x		167,203	1	0	47,844
ATTORNEY (24) HEATHER KENDALL	0 0 40 0										
ATTORNEY	0 0					X		167,514	1	0	31,486
(25) RICHARD GUEST	40 0					x		151,460		o	39,106
ATTORNEY (26) SUSAN NOE	0 0	ļ									
ATTORNEY	40 0 0 0					Х		168,014		0	13,055
1b Sub-Total						•					
c Total from continuation sheets to Pari	-			•		-		1 020 526			275 272
d Total (add lines 1b and 1c) Total number of individuals (including by				· adal	hove	a) who	reci	1,820,526	0		375,272
\$100,000 of reportable compensation						.,	,,,,,,	errea more man			
										Yes	No
3 Did the organization list any former off on line 1a? If "Yes," complete Schedule.			e, key •	, em	nplo [.]	yee, o •	r hig • •	hest compensate		3	No
4 For any individual listed on line 1a, is to organization and related organizations individual										l Yes	
5 Did any person listed on line 1a receiv services rendered to the organization?									ndividual for	5	No
Section B. Independent Contract	ore										
Complete this table for your five highest compensation from the organization Ro	t compensated										r
	(A)	21011 101	LITE	cale	iiua	year	. ciiu		(B)	(C)
Rosenfeld Consultant Services. PO Box 13 HOMER Ak	ousiness address							Descript Enviromental W	ion of services	Compe	ensation 104.531

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►1

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f g
Program Service Revenue	2a b c d e f g 3 4 5 5
levenue	3 4 5 6a b c d 7a b
Other R	b c 9a b c 10a
	b c 11a b
	d e

Form 99		<u> </u>						Page 9
Part V	4++1	Statement o Check if Schedu	f Revenue ule O contains a respon	se or note to any lir	ne in this Part VIII			্য
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>s</u> 2	1a	Federated cam	paigns 1a	47,245				
Grants	ь	Membership du	es 1b					
المَّانِّ	С	Fundraising eve	ents 1c					
Giffs, iilar Aı	d	Related organiz	ations 1d					
s, G imil	е	Government grants	s (contributions) 1e	2,924,573				
tion r. S	f	All other contribution	ons, gifts, grants, and 1f	1,813,031				
Contributions, Gifts, Grants and Other Similar Amounts	g		ons included in lines		}			
id C		1a-1f \$			4 794 940			
<u>ਨੂੰ ਵ</u>	h	Total. Add lines	sla-lt	•	4,784,849			
a E	2a	LEGAL FEES		Business Code 900099	1 206 465	1,306,465		
ever	b			900099	1,306,465	1,300,403		
ъ П	С	-						
er vi	d							
<i>ა</i>)	e							
Program Serwoe Revenue	f	All other progra	im service revenue					
<u>*</u>	g	Total. Add lines	s 2a – 2f		1,306,465			
	3		ome (including dividenc ar amounts)		228,049			228,049
	4		tment of tax-exempt bond p		0			
	5	Royalties		🕨	1,865			1,865
	63	Gross rents	(ı) Real	(II) Personal				
	6a b	Less rental						
	c	expenses Rental income	0	0				
	d	or (loss) Net rental incoi	me or (loss)	🛌	0			
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	1,569,247					
	ь	Less cost or other basis and	1,237,608					
	c	sales expenses Gain or (loss)	331,639					
	d		[331,639			331,639
enne	8a	Gross income f events (not inc						
Other Revenue		See Part IV, lin	e 18 a					
ફ	b c		penses b [(loss) from fundraising e	vents 🛌	0			
_			rom gaming activities					
	ь	Less direct ex	penses b					
	С		loss) from gaming activ	rities	0			
	10a	Gross sales of returns and allo						
	ь	Less cost of go	oods sold b					
	С		loss) from sales of inve		0			
	112	Miscellaneous		Business Code 900099	5,756	5,756		
	11a b	REIMBURSEME	_	900099	700	700		
	c	NARF PUBLICA		900099	677	677		
	d		ue		19,668	19,668		
	e	Total. Add lines	s 11a-11d	🕨	26,801			
	12	Total revenue.	See Instructions		6,679,668	1,333,266		561,553
					0,079,000	1,333,200		301,333

Part IX Statement of Functional Expenses

	ection 501(c)(3) and 501(c)(4)) organizations must complete all columns /	All other organizations must complete column (A)
--	--------------------------------	---	--

	Check if Schedule O contains a response or note to any line in this	Part IX			<u></u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,441,642	1,441,642		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,228,286	784,447	256,960	186,879
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	3,122,652	2,573,052	287,469	262,131
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	169,537	123,920	34,036	11,581
9	Other employee benefits	541,916	448,623	17,923	75,370
10	Payroll taxes	275,519	202,440	29,577	43,502
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
c	Accounting	26,000		26,000	
d	Lobbying	15,744	15,744		
e	Professional fundraising services See Part IV, line 17	29,098			29,098
f	Investment management fees	45,344		45,344	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,040,632	1,040,632		
12	Advertising and promotion	28,533	1,010,032		28,533
13	Office expenses	544,598	280,102	55,929	208,567
14	Information technology	103,997		8,904	33,732
15	Royalties	0	01,301	3,501	33,732
16	Occupancy	341,463	311,931	18,714	10,818
17	Travel	666,507	527,121	69,111	70,275
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	52.,122	55,121	, ,,,,,,
19	Conferences, conventions, and meetings	29,253	13,160	238	15,855
20	Interest	4,976		4,976	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	46,634	36,890	3,975	5,769
23	Insurance	23,211	21,150	1,298	763
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	DIRECT MARKET MAILINGS	265,502			265,502
b	LIBRARY	44,718	43,481	311	926
c	COSTS RELATED TO LEGAL CASES	62,928	62,928		
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	10,098,690	7,988,624	860,765	1,249,301
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			.
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	348,617	1	1,217,972
	2	Savings and temporary cash investments	5,615,830	2	2,568,736
	3	Pledges and grants receivable, net	4,304,527	3	1,558,305
	4	Accounts receivable, net	573,605	4	432,867
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
s	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	5	0
ė			0		0
Assets	7	Notes and loans receivable, net	0	7	0
•	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	125,717	9	136,038
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 1,248,406			
	b	Less accumulated depreciation 10b 982,975	218,605	10 c	265,431
	11	Investments—publicly traded securities	4,790,738	11	5,462,835
	12	Investments—other securities See Part IV, line 11	4,524,101	12	5,413,635
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	47,500
	15	Other assets See Part IV, line 11	5,458	15	17,756
	16	Total assets. Add lines 1 through 15 (must equal line 34)	20,507,198	16	17,121,075
	17	Accounts payable and accrued expenses	1,082,335	17	1,019,009
	18	Grants payable	0	18	0
	19	Deferred revenue	7,532	19	15,979
	20	Tax-exempt bond liabilities	0	20	0
S	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ge S		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	47,832	23	82,551
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	204 757		205 400
		D	281,757	25	285,196
	26	Total liabilities. Add lines 17 through 25	1,419,456	26	1,402,735
Φ S		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	13,711,924	27	13,208,792
<u>छ</u>	28	Temporarily restricted net assets	4,405,696	28	1,527,132
<u></u>	29	Permanently restricted net assets	970,122	29	982,416
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.	3,3,,22		
ō	30	Capital stock or trust principal, or current funds		30	
ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
7	33	Total net assets or fund balances	19,087,742		15,718,340
Ş	34	Total liabilities and net assets/fund balances	20,507,198	34	17,121,075
		rotar napinties and net assets/land parallets	20,507, 190	34	17, 121,073

Par	t XI Reconcilliation of Net Assets				-3
	Check if Schedule O contains a response or note to any line in this Part XI				<u>.</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,6	579,668
2	Total expenses (must equal Part IX, column (A), line 25)	2		10,0	98,690
3	Revenue less expenses Subtract line 2 from line 1	3		-3,4	19,022
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		19,0	87,742
5	Net unrealized gains (losses) on investments	5			49,620
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		15,7	18,340
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
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?	ne	3a	Yes	
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	Yes	

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As Filed Data -

DLN: 93493035007325

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1)nonexempt charitable trust.

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

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

Open to Public Inspection

Name of the organization Native American Rights Fund Inc **Employer identification number**

4	Г			perative hospital se n organization opera						1)(A)(iii). E	nter the
4	,			ty, and state	tea in conjun	ction with a	nospital des	cribed in sec	ction 170(b)(1)(A)(III). □	nter the
5	Γ	An orga	anızatıon op	erated for the benefi	t of a college	or universi	ty owned or o	perated by a	a governmen	tal unıt desc	rıbed ın
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
6	Γ	A feder	al, state, or	local government o	government	tal unıt desc	rıbed ın secti	on 170(b)(1	L)(A)(v).		
7	굣			at normally receives			support from	a governme	ental unit or f	rom the gene	eral public
8	_			n 170(b)(1)(A)(vi).			nnlete Part II	.)			
9	'_	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross									
_	•			ities related to its e							
				oss investment inco							
		acquire	d by the org	janızatıon after June	30,1975 S	ee section !	509(a)(2). (C	omplete Pai	rt III)	,	
10	Г	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).									
11	Γ	An orga	anızatıon org	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fund	ctions of, or t	o carry out t	he purposes of
			•	ly supported organiz				•		ee section 5	09(a)(3). Check
				bes the type of supp b Type II c						n-functiona	lly integrated
e	\vdash			ox, I certify that the							
	'		_	on managers and ot	_		•		•	•	•
		section	509(a)(2)								
f			rganızatıon :hıs box	received a written d	etermination	from the IR	S that it is a	Type I, Typ	e II, or Type	III supporti	ng organization,
g				2006, has the organ	ızatıon accer	oted any gift	or contributi	on from anv	of the		,
-		followir	g persons?								
				rectly or indirectly o			_	persons de	scribed in (ii)		Yes No
		-	•	governing body of th		_	u,			11g	
				er of a person descr						11g	
				lled entity of a perso						11g(.)
h		Provide	the following	ng information about	the supporte	ed organizat	ion(s)				
	i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of
	suppor			organization	organizati		the organi		organizat		monetary
0	rganiza	ation		(described on lines 1- 9 above	col (i) lis		ın col (i) o suppor	'	col (i) org		support
				or IRC section	your gove docume		Suppor		in the U	3 '	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	1
Tota											

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 4,883,293 4,958,526 16,104,389 10,173,190 4,784,849 40,904,247 include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4,883,293 4,958,526 16,104,389 10,173,190 4,784,849 40,904,247 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 1,645,170 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 39,259,077 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total beginning in) 🟲 4,883,293 16,104,389 10,173,190 4,784,849 Amounts from line 4 4,958,526 40,904,247 Gross income from interest, dividends, payments received on 66,899 securities loans, rents, royalties 99,457 71,125 119,853 229,914 587,248 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 41,491,495 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 94 620 % Public support percentage for 2012 Schedule A, Part II, line 14 15 94 342 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┡┰ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, ne 12. Also complete this part for any additional information. (See instru		
		Facts And Circumstances Test		
Retu	ırn Reference	Explanation		
		Schodulo A / Form 0	000 er 000 E7) 201	

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493035007325

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Open to Public Inspection

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

- 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, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III				
	me of the organization ave American Rights Fund Inc			Emplo	yer ide	ntification number
	-				511876	
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a secti	on 52	7 organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	lıtıcal campaıgn act	civities in Part IV		
2	Political expenditures				>	\$
3	Volunteer hours					
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).		
1		e tax incurred by the organization	_		►	\$
2	Enter the amount of any excise	e tax incurred by organization mar	nagers under sectio	n 4955	.	\$
3	•	section 4955 tax, did it file Form 4	_			☐ Yes ☐ No
4a	Was a correction made?	·	,			☐ Yes ☐ No
ь	If "Yes," describe in Part IV					·
		ganization is exempt unde	er section 501(c), except sect	ion 50	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activitie	s 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organization	s for section 527	.	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	0-POL, line 17b	•	¢.
4	Did the filing organization file I	Form 1120-POL for this year?				→
5	organization made payments l amount of political contribution	nd employer identification number For each organization listed, enter ns received that were promptly an political action committee (PAC)	the amount paid fro d directly delivered	om the filing organi: to a separate polit	zatıon's ıcal org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) Amount pa filing organiza funds If none, e	tıon's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisla	16,396		
c	Total lobbying expenditures (add lines 1a and 1b	16,396		
d	Other exempt purpose expenditures	10,082,294		
e	Total exempt purpose expenditures (add lines 1	10,098,690		
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	654,935	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lin	e 1f)	163,734	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 472) reporting	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total	
2a	Lobbying nontaxable amount	452,555	526,667	618,622	654,935	2,252,779	
b	Lobbying ceiling amount (150% of line 2a, column(e))					3,379,169	
c	Total lobbying expenditures	52,100	47,600	46,681	16,396	162,777	
d	Grassroots nontaxable amount	113,139	131,667	154,656	163,734	563,196	
e	Grassroots ceiling amount (150% of line 2d, column (e))					844,794	
f	Grassroots lobbying expenditures	0	2,984	4,951	0	7,935	

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	g Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	.	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201124416 3 (1 31111 333 31 333 12) 2313		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	
l		

Schedule D (Form 990) 2013

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DLN: 93493035007325

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Supplemental Financial Statements

Open to Public

Nam	e of the organization e American Rights Fund Inc			loyer identifica	tion number	
ar	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990,			0611876 or Accounts	. Complete	e if the
	organization answered Tes to Form 550,	(a) Donor advised funds		(b) Funds and	other accoun	ıts
٦	Total number at end of year			` '		
,	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
4	Aggregate value at end of year					
	Did the organization inform all donors and donor adviso funds are the organization's property, subject to the org		nor advi	sed	┌ Yes	┌ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefi conferring impermissible private benefit?				┌ Yes	┌ No
	Conservation Easements. Complete if	the organization answered "Yes"	to Forn	n 990 Part IV	<u> </u>	,
	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of a Preservation of a	certifie	d historic struc	ture	
	easement on the last day of the tax year	4				
				Held at the	End of the Y	ear_
	Total number of conservation easements		2a			
•	Total acreage restricted by conservation easements		2b			
	Number of conservation easements on a certified histo	rıc structure ıncluded ın (a)	2c			
	Number of conservation easements included in (c) acquinstoric structure listed in the National Register	uired after 8/17/06, and not on a	2d			
	Number of conservation easements modified, transferre the tax year ►	ed, released, extinguished, or termina	ted by th	ne organization	during	
	Number of states where property subject to conservation	on easement is located 🗠				
	Does the organization have a written policy regarding the enforcement of the conservation easements it holds?	he periodic monitoring, inspection, ha	ndling of	violations, and	┌ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation ease	ements o	during the year		
	Amount of expenses incurred in monitoring, inspecting, ► \$, and enforcing conservation easemen	ts during	g the year		
	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(H)^2$) above satisfy the requirements of se	ection 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemei	footnote to the organization's financia				
rt	Organizations Maintaining Collections Complete if the organization answered "Ye		, or Otl	her Similar .	Assets.	
,	If the organization elected, as permitted under SFAS 1: works of art, historical treasures, or other similar asset service, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education	, or rese	arch in furthera		.
	If the organization elected, as permitted under SFAS 1: works of art, historical treasures, or other similar asset service, provide the following amounts relating to these	ts held for public exhibition, education				2
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X					
	If the organization received or held works of art, historical following amounts required to be reported under SFAS 1					
	Revenues included in Form 990, Part VIII, line 1			► \$		
	Accets included in Form 990 Part V			b ¢		

Par	Organizations Maintaining Co	llections of Art, H	<u>listori</u>	cal Treas	sures, or O	<u>tner</u>	Similar AS	sets (c	<u>ontinuea)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	check	any of the fo	ollowing that a	re a s	significant use	of its	
а	Public exhibition	C	d $ egt$	Loan or ex	change progr	ams			
b	Scholarly research	•	e 🔽	Other AS	SIST IN RES	EARC	CH - CLIENT C	ASES	
c	Preservation for future generations								
4	Provide a description of the organization's c Part XIII	ollections and explain h	how the	y further the	e organization	's exe	mpt purpose ı	n	
5	During the year, did the organization solicit							_	_
Do	assets to be sold to raise funds rather than	· ·						Yes	✓ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar				on answered	ı re	s to Form 9	90,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?				s or other ass	ets no		_ Yes	□ No
ь	If "Yes," explain the arrangement in Part XI	II and complete the fol	lowing t	able					
							Am	ount	
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 F	orm 990, Part X, line 2	1?			· <u> </u>	Ī	_ Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the ex	olanatı	on has been	n provided in P	art X	III		Γ
Pa	rt V Endowment Funds. Complete		-		•				
	•	(a)Current year ((b) Prior y	ear b (c)	Two years back	(d) T⊦	ree years back	(e) Four y	ears back
1a	Beginning of year balance	5,375,818		359,715	1,768,590		2,404,013		985,392
b	Contributions	951,052	3,	130,514	3,627,190		649,850		1,706,805
C	Net investment earnings, gains, and losses								
d	Grants or scholarships								
e	Other expenditures for facilities	2.017.222	2	-04 411	056.065		1 205 272		200 104
	and programs	3,817,322	Ζ,:	594,411	856,065		1,285,273		288,184
f	Administrative expenses	0.500.540			4 500 745		. 750 500		
g	End of year balance	2,509,548	•	195,818	4,539,715		1,768,590		2,404,013
2	Provide the estimated percentage of the cur		(line 1g	column (a)) held as				
а	Board designated or quasi-endowment ►	0 %							
b	Permanent endowment ► 39 150 %								
c	Temporarily restricted endowment • 60 The percentages in lines 2a, 2b, and 2c sho	850 % uld equal 100%							
За	Are there endowment funds not in the posse	ssion of the organization	on that a	are held and	l administered	fort	he		
	organization by							Yes	+
	(i) unrelated organizations					•	3a(-	No
b	(ii) related organizations						3a(i		No I
4	If ites to satiff, are the related organization	nis listed as required of				•		<u> </u>	
	Describe in Part XIII the intended uses of t	he organization's endov	vment fi	ınds					
	Describe in Part XIII the intended uses of t				swered 'Yes	' to F	orm 990, Pa	rt IV, l	ine
	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line	ent. Complete if the	organ	ızatıon an					
	t VI Land, Buildings, and Equipme	ent. Complete if the	organ		er (b) Cost or o	ther	(c) Accumulated depreciation		ine Book value
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line	ent. Complete if the	organ	ızatıon ans	(b)Cost or o basis (othe	ther	(c) Accumulated		
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line Description of property	ent. Complete if the	organ	ızatıon ans	(b)Cost or obasis (other	other er)	(c) Accumulated	(d) E	Book value
Par 1a	Land, Buildings, and Equipment 11a. See Form 990, Part X, line Description of property Land	ent. Complete if the	organ	ızatıon ans	(b)Cost or obasis (other	other er) ,937	(c) Accumulated depreciation	(d) E	300k value 58,937
Par 1a b	Land, Buildings, and Equipme 11a. See Form 990, Part X, line Description of property Land	ent. Complete if the	organ	ızatıon ans	(b)Cost or o basis (other	other er) ,937	(c) Accumulated depreciation	(b)	300k value 58,937
1a b c d	Land, Buildings, and Equipmental See Form 990, Part X, line Description of property Land	ent. Complete if the 10.	(a ba:	Ization and	(b)Cost or o basis (other 58 80 760 349	,937 ,000	(c) Accumulated depreciation	(d) E	58,937 0

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other (A) HEDGE FUND	3,913,635	F
(B) LIMITED PARTNERSHIP	1,500,000	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	5,413,635	answored 'Ves' to Form 000 Part IV line 11s
Part VIII Investments—Program Related. Co See Form 990, Part X, line 13.	omplete if the organization	answered Yes to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		, , , , , , , , , , , , , , , , , , ,
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	n answered 'Yes' to Form 990	Part IV line 11d See Form 990 Part X line 15
(a) Descr		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. Complete if the orga		·
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
Federal income taxes	0	
RETIREMENT OBLIGATION	285,196	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	285,196	

Par		evenue per Audited Financial Statements With Revenue vered 'Yes' to Form 990, Part IV, line 12a.	per Re	turn Complete if
1		r support per audited financial statements	1	6,729,288
2		it not on Form 990, Part VIII, line 12		· ·
а		ments	,	
b		acılıtıes		
c		s 2c		
d			-	
e	Add lines 2a through 2d .		2e	49,620
3	-		3	6,679,668
4		0, Part VIII, line 12, but not on line 1		0,073,000
a		uded on Form 990, Part VIII, line 7b . 4a		
b	·	4b	-	
c			4c	
5		d 4c. (This must equal Form 990, Part I, line 12)	5	6,679,668
		xpenses per Audited Financial Statements With Expense	_	<u> </u>
rei		swered 'Yes' to Form 990, Part IV, line 12a.	s per r	cetarii. Complete
1	Total expenses and losses per	raudited financial statements	1	10,098,690
2	Amounts included on line 1 bu	t not on Form 990, Part IX, line 25		
а	Donated services and use of fa	acilities		
b	Prior year adjustments	2b	1	
c	Otherlosses		1	
d	Other (Describe in Part XIII)		1	
e				
3	Subtract line 2e from line 1 .		3	10,098,690
4		0, Part IX, line 25, but not on line 1:		
а		uded on Form 990, Part VIII, line 7b 4a		
b		4b	1	
c			4c	
5		nd 4c. (This must equal Form 990, Part I, line 18)	5	10,098,690
_	t XIII Supplemental Inf			20,000,000
Part	·	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to	•	any additional
		Explanation		
PRO۱	ECTED UNDER SFAS 116 /IDE FOOTNOTE FROM NCIAL STATEMENTS	PART III, LINE 1A COLLECTIONS OF WORKS OF ART, HISTORICAL ASSETS ARE NOT CAPITALIZED IN AS MUCH AS THE ITEMS ARE FOR CONTINUOUSLY PURCHASES OF COLLECTION ITEMS ARE R ACQUISITION AS DECREASES IN UNRESTRICTED NET ASSETS, OPERMANENTLY RESTRICTED NET ASSETS IF THE ASSETS USED TO WERE RESTRICTED TO THAT USE BY DONOR STIPULATION CONTINUED AND INSURANCE RECOVERIES RELATED TO COLLE REPORTED AS INCREASES IN THE APPROPRIATE NET ASSET CLA COLLECTIONS CONSIST OF RARE BOOKS AND MAPS THESE COLEDUCATIONAL AND RESEARCH PURPOSES THEY ARE SUBJECT TREQUIRES PROCEEDS FROM THE DISPOSITION OF COLLECTION ACQUIRE OTHER COLLECTION ITEMS	PRESERVEPORTER R IN TEN PURCH RIBUTION TEMENT CTION I SSES NA LECTION O A POL	TED AND CARED D IN THE YEAR OF MPORARILY OR MASE THE ITEMS DNS OF S PROCEEDS FROM TEMS ARE ARF'S NS ARE HELD FOR ICY THAT
AND EXEM	CRIPTION OF COLLECTIONS HOWTHEY FURTHER THE IPT PURPOSE CRIBE THE INTENDED USES	PART III, LINE 4 COLLECTIONS CONSIST OF RARE BOOKS AND M ARE HELD FOR EDUCATIONAL AND RESEARCH PURPOSES, WHICH ASSISTANCE AND EDUCATING THE PUBLIC ABOUT INDIAN RIGH PART V, LINE 4 THE ENDOWMENT ASSETS INCLUDE ONLY DONOR	I ARE US TS, LAW	ED IN TECHNICAL S, AND ISSUES
ENDO	HE ORGANIZATION'S DWMENT FUNDS	FUNDS HELD IN PERPETUITY OR FOR DONOR-SPECIFIED PERIOD THE ENDOWMENT ASSETS ARE UNRESTRICTED IN ACCORDANCE STIPULATIONS AND ARE USED TO SUPPORT PROGRAMS AND SUF	WITH DO	ONOR IG OPERATIONS
UNCI	ERTAIN TAX POSITIONS	PART X, LINE 2 MANAGEMENT HAS EVALUATED THEIR INCOME TO GUIDANCE INCLUDED IN ASC 740 BASED ON THEIR REVIEW, MAIDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE FINITHE FINANCIAL STATEMENTS	NAGEME	NT HAS NOT

•	<u> </u>						
Part XIII Supplemental Information (continued)							
Ret	turn Reference	Explanation					

Schedule D (Form 990) 2013

DLN: 93493035007325

OMB No 1545-0047

(Form 990 or 990-EZ)

SCHEDULE G

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV. lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** Native American Rights Fund Inc 84-0611876 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 e Solicitation of non-government grants Mail solicitations ✓ Internet and email solicitations f Solicitation of government grants Phone solicitations ✓ In-person 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 services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No DIRECT MAIL BRICKMILL MARKETING Νo 747,628 24.000 723,628 **SERVICES** TELEMARKET PUBLIC OUTREACH 0 Νo 5,098 0 FUNDRAISING LLC 3 10 747,628 29,098 723,628 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut	ion answered "Yes" to tions and gross income	Form 990, Part IV, li on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List				
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))				
			(event type)	(event type)	(total number)	(-),				
Revenue	1	Gross receipts								
	2	Less Contributions								
<u>~</u>	3	Gross income (line 1 minus line 2)								
	4	Cash prizes								
မှာ	5	Noncash prizes								
Expenses	6	Rent/facility costs								
ă	7	Food and beverages .								
Direct	8	Entertainment								
ā	9	Other direct expenses .								
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()				
	11	Net income summary Subtract li	ne 10 from line 3, colum	n (d)						
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than				
<u>Ф</u>		\$13,000 OH FORM 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add				
Revenue				bingo/progressive bingo		col (a) through col (c)				
<u>~</u>	1	Gross revenue								
ses	2	Cash prizes								
Expenses	3	Non-cash prizes								
Direct B	4	Rent/facility costs								
<u>ā</u>	5	Other direct expenses								
	6	Volunteer labor	✓ Yes % ✓ No %	Г Yes%	☐ Yes					
	7	Direct expense summary Add lines	s 2 through 5 in column	(d)						
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)						
9	Ent	er the state(s) in which the organiza	ition operates gaming ac	ctivities						
а	a Is the organization licensed to operate gaming activities in each of these states? Yes No									
b	If"	No," explain								
10a b		re any of the organization's gaming l Yes," explain								

Does	s the organization operate gaming activ	vities with nonmembers	,	· · 「Yes 「No					
12	Is the organization a grantor, benefic	lary or trustee of a trust	t or a member of a partnership or other entity						
	formed to administer charitable gami	ng?		· · · · Fyes F No					
13	Indicate the percentage of gaming ac	tivity operated in							
а	The organization's facility			13a %					
b	An outside facility			13b %					
14	Enter the name and address of the pe	erson who prepares the o	organization's gaming/special events books	and records					
	Name 🟲								
	Address ►								
	revenue?	revenue received by the	n whom the organization receives gaming						
c		· · · · · · · · · · · · · · · · · · ·							
	if Yes, enter name and address of t	f "Yes," enter name and address of the third party							
	Name ▶								
	Address ▶								
16	Gaming manager information								
	Name 🟲								
	Gaming manager compensation ► \$								
	Description of services provided								
17	Director/officer Mandatory distributions	☐ Employee	Independent contractor						
а	Is the organization required under st	ate law to make charıtal	ble distributions from the gaming proceeds to						
	retain the state gaming license? $$.			· · · Fyes Fno					
b	Enter the amount of distributions req	uired under state law dis	stributed to other exempt organizations or sp	pent					
	in the organization's own exempt act	= :		 					
Pai		15b, 15c, 16, and 17t	planations required by Part I, line 2b, constant the plant by as applicable. Also complete this par						
	Return Reference		Explanation						
FUN	DRAISING	POSTAGE) TO BRICI	AYMENTS FOR PRODUCTION EXPENSES (S KMILL MARKETING SERVICES WERE MAD S TOTAL PRODUCTION EXPENSES AMOU	E SEPARATELY FROM					

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

DLN: 93493035007325

OMB No 1545-0047

Employer identification number

Schedule I (Form 990)

Department of the Treasury

Native American Rights Fund Inc

Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990 ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Water Commenced Highes Fand The						84-0611876	
Part I General Informatio	n on Grants and	Assistance				•	
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization 	vard the grants or ass	ıstance?	·		_	•	✓ Yes 🗀
Part II Grants and Other A Form 990, Part IV, line							es" to
(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 gra or assistance
See Additional Data Table							

- Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
- Enter total number of other organizations listed in the line 1 table

24

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.									
(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance				
		1							

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference	Explanation								
, ,	PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS ORGANIZATIONS ARE SUBCONTRACTORS RELATED TO THE FUNDING FROM THE DEPARTMENT OF JUSTICE, OFFICE OF JUSTICE PROGRAMS FOR TRIBAL CIVIL AND CRIMINAL LEGAL ASSISTANCE GRANTS MONITORING INCLUDES THOROUGH REVIEW OF PERFORMANCE AND EXPENDITURES SUBJECT TO STRICT TERMS, CONDITIONS, AND SPECIFICATIONS, INCLUDING QUARTERLY REPORTING AND AUDITING REQUIREMENTS AND PERIODIC SITE VISITS								

Additional Data

Software ID:

Software Version:

EIN: 84-0611876

Name: Native American Rights Fund Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
ALASKA LEGAL SERVICES 1016 W 6TH AVE ANCHORAGE,AK 99501	92-0034754	501(C)(3)	13,317				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ANISHINABE LEGAL SERVICES PO BOX 157 CASS LAKE,MN 56633	41-0960032	501(C)(3)	46,623						

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
CALIFORNIA INDIAN LEGAL SERVICES 609 S ESCONDIDO BLVD ESCONDIDO,CA 86515	94-1676390	501(C)(3)	121,141						

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(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	
COLORADO LEGAL SERVICES INC 835 E 2ND AVE 300 DURANGO,CO 81301	84-0402702	501(C)(3)	15,919					

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(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
DAKOTA PLAINS LEGAL SERVICES PO BOX 727 MISSION,SD 57555	46-0310828	501(C)(3)	78,454				

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
DNA PEOPLE'S LEGAL SERVICES PO BOX 306 WINDOW ROCK, AZ 86515	86-0207220	501(C)(3)	171,844						

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
IDAHO LEGAL AID SERVICES INC 310 N 5TH ST BOISE,ID 83702	82-0293641	501(C)(3)	68,255							

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
LEGAL AID OF NORTH CAROLINA SYLVA OFFICE PO BOX 426 SYLVA,NC 28779	31-1784161	501(C)(3)	28,122							

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(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				
LEGAL AID OF WYOMING 211 W 19TH ST STE 300 CHEYENNE,WY 82001	83-0222545	501(C)(3)	44,922								

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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			
LEGAL ASSISTANCE OF NORTH DAKOTA PO BOX 1893 BISMARCK,ND 58502	45-0336235	501(C)(3)	60,670							

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
MICHIGAN INDIAN LEGAL SERVICES 814 S GARFIELD AVE TRAVERSE CITY,MI 49686	38-2077208	501(C)(3)	60,320							

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
MISSISSIPPI CHOCTAW LEGAL DEFENSE PO BOX 6255 CHOCTAW,MS 39350	64-0345731	GOV'T ORG	53,735						

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
MONTANA LEGAL SERVICES 616 HELENA AVE STE 100 HELENA,MT 59601	81-0298262	501(C)(3)	63,578							

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
NEBRASKA LEGAL SERVICES 1904 FARNAM ST STE 500 OMAHA,NE 68102	47-0483506	501(C)(3)	43,710						

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
NEVADA LEGAL SERVICES 530 S 6TH ST LAS VEGAS,NV 89101	88-0176914	501(C)(3)	66,113							

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
NEW MEXICO LEGAL AID PO BOX 25486 ALBUQUERQUE,NM 87125	85-0116950	501(C)(3)	79,094						

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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		
NORTHWEST JUSTICE PROJECT 401 2ND AVE SOUTH SEATTLE, WA 98104	91-1687791	501(C)(3)	22,432						

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(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	
OKLAHOMA INDIAN LEGAL SERVICES 4200 PERIMETER CTR OKLAHOMA CITY,OK 73112	73-1142462	501(C)(3)	78,501					

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(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	
OREGON LEGAL AID SERVICESNA PROGRAM 1827 NE 44TH AVE PORTLAND,OR 87213	83-0635480	501(C)(3)	14,432					

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(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	
PINE TREE LEGAL ASSISTANCE PO BOX 547 PORTLAND,ME 04112	01-0279387	501(C)(3)	54,940					

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(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	
SOUTHERN ARIZONA LEGAL AID 2343 E BRADWAY BLVD TUCSON,AZ 85719	86-0143449	501(C)(3)	87,716					

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(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	
TEXAS RIO GRANDE LEGAL AID 300 S TEXAS BLVD WESLACO,TX 78596	74-1675230	501(C)(3)	62,988					

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(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	
UTAH LEGAL SERVICES 205 NORTH 400 WEST SALT LAKE CITY,UT 84103	87-0298910	501(C)(3)	46,800					

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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	
WISCONSIN JUDICAREINDIAN LAW OFFICE PO BOX 6100 WAUSAU,WI 54402	39-1170880	501(C)(3)	58,016					

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DLN: 93493035007325

OMB No 1545-0047

(Form 990)

Department of the Treasury

Internal Revenue Service

Schedule J

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Native American Rights Fund Inc **Employer identification number**

84-0611876

Pa	rt I Questions Regarding Compensation	on				
					Yes	No
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part I					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b		
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Ex		- · · · · · · · · · · · · · · · · · · ·	2		
3	Indicate which, if any, of the following the filing org organization's CEO/Executive Director Check all used by a related organization to establish comper	that apply				
	Compensation committee	V	Written employment contract			
	☐ Independent compensation consultant	٦	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	t?	4a		No
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
C	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only n	nust comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section a compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section a compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section a payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described		tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8	igsquare	No
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	he rebutta	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)JOHN ECHOHAWK EXECUTIVE DIRECTOR	(i) (ii)	201,390 0	0 0	953 0	13,886 0	23,023 0	239,252	0
(2)MELODY MCCOY LITIGATION MGMT COMMITTEE	(i) (ii)	169,030 0	0	173 0	12,420 0	31,179 0	212,802	0 0
(3)KIM GOTTSCHALK LITIGATION MGMT COMMITTEE	(i) (ii)	173,806 0	0	953 0	12,107 0	20,654 0	207,520	0
(4)NATALIE LANDRETH LITIGATION MGMT COMMITTEE	(i) (ii)	135,553 0	0	75 0	7,715 0	16,641 0	159,984 0	0
(5)DON WHARTON ATTORNEY	(i) (ii)	170,557 0	0	1,545 0	16,381 0	12,616 0	201,099	0 0
(6)STEVEN MOORE ATTORNEY	(i) (ii)	166,708 0	0	495 0	18,322 0	29,522 0	215,047	0
(7)HEATHER KENDALL ATTORNEY	(i) (ii)	167,191 0	0	323 0	11,554 0	19,932 0	199,000	0
(8)RICHARD GUEST ATTORNEY	(i) (ii)	151,319 0	0	141 0	8,950 0	30,156 0	190,566 0	0
(9)SUSAN NOE ATTORNEY	(i) (ii)	167,864 0	0	150 0	3,159 0	9,896 0	181,069 0	0 0

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference **Explanation**

Schedule J (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 84-0611876

Name: Native American Rights Fund Inc

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

								
(A) Name	!	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
JOHN ECHOHAWK EXECUTIVE DIRECTOR	(I) (II)		0	953 0	13,886 0	23,023	239,252	0
MELODY MCCOY LITIGATION MGMT COMMITTEE	(I) (II)		0	173 0	12,420 0	31,179 0	212,802	0
KIM GOTTSCHALK LITIGATION MGMT COMMITTEE	(I) (II)		0	953 0	12,107 0	20,654 0	207,520	0
NATALIE LANDRETH LITIGATION MGMT COMMITTEE	(I) (II)		0	75 0	7,715 0	16,641 0	159,984	0
DON WHARTON ATTORNEY	(I) (II)		0	1,545 0	16,381 0	12,616 0	201,099	0
STEVEN MOORE ATTORNEY	(I) (II)		0	495 0	18,322 0	29,522 0	2 215,047	0
HEATHER KENDALL ATTORNEY	(I) (II)		0	323 0	11,554 0	19,932 0	199,000	0 0
RICHARD GUEST ATTORNEY	(I) (II)		0	141	8,950 0	30,156 0	190,566	0
SUSAN NOE ATTORNEY	(I) (II)		0	150	3,159 0	9,896 0	181,069	0 0

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As Filed Data -

DLN: 93493035007325

OMB No 1545-0047

2013

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization Native American Rights Fund Inc Employer identification number

84-0611876

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROCESS TO REVIEW THE FORM 990	
PROCESS FOR MONITORING COMPLIANCE WITH CONFLICT OF INTEREST POLICY	FORM 990, PART VI, QUESTION 12C BOARD OF DIRECTORS, OFFICERS, SUPERVISORS, AND OTHER PROFE SSIONAL STAFF ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALL Y (BY JANUARY 15 OF EACH YEAR) DISCLOSURE AND DETERMINATION OF THE POTENTIAL CONFLECT OF INTEREST (PCI) AT THE BOARD OF DIRECTORS LEVEL ARE DISCLOSED TO THE BOARD CHAIR (IF THE BO ARD CHAIR IS THE ONE WITH PCI, THEN TO THE VICE-CHAIR), WHICH IS THEN BROUGHT TO THE FULL BOARD FOR CONSIDERATION AND DETERMINATION BOARD MEMBERS WITH PCI SHALL BE ABSENT FROM THE BOARD'S DISCUSSION AND DECISION EMPLOYEES WITH PCI SHALL GO TO THE EXECUTIVE DIRECTOR (E D) (IF ED HAS A PCI, THEN TO THE BOARD CHAIR) THE MATTER WILL THEN GO TO CORPORATE OFFICE RS FOR CONSIDERATION AND DETERMINATION
REVIEW OF CEO OR TOP MGMT OFFICIAL COMPENSATION	FORM 990, PART VI, QUESTION 15A & 15B AN EXTENSIVE SALARY SURVEY IS PERFORMED FOR ALL POSI TIONS IN THE SUMMER OF EVERY EVEN YEAR IN WHICH CURRENT SALARIES ARE COMPARED TO MARKET SU RVEY DATA OBTAINED FROM A VARIETY OF PROFESSIONAL SURVEY SOURCES THIS INFORMATION IS THEN SUBMITTED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW AND THEN DISCUS SED AND APPROVED DURING A REGULARLY SCHEDULED EXECUTIVE COMMITTEE MEETING MINUTES OF THE MEETING ARE TAKEN FOR SUBSTANTIATION OF THE DELIBERATION AND DECISION THIS PROCEDURE WAS LAST PERFORMED IN 2014
EXPLAN WHY 1023/1024, 990, OR 990-T IS NOT AVAILABLE TO PUBLIC	FORM 990, PART VI, QUESTION 18 FORM 1023 WAS FILED BEFORE JULY 15, 1987 AND A COPY WAS NOT AVAILABLE AT THAT TIME
DESCRIBE HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC	Form 990, Part VI, Question 19 FINANCIAL STATEMENTS ARE AVAILABLE ON OUR WEBSITE AND UPON REQUEST REQUESTS (WITH A VALID BUSINESS PURPOSE) FOR THE MANAGING DOCUMENTS AND CONFLICT OF INTEREST POLICY WILL BE CONSIDERED
GOVERNMENT GRANTS	FORM 990, PART VIII, LINE 1(E) THE AMOUNT SHOWN AS GOVERNMENT GRANTS ON LINE 1(E) INCLUDES \$1,456,744 OF CONTRIBUTION REVENUE FROM APPROXIMATELY 25 TRIBAL GOVERNMENTS
FORM 990 PART IX LINE 11G	DESCRIPTION EXPERT/CONSULTING FEES TOTAL FEES 1040632