DLN: 93493036009493

Form **990** 2

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2011

OMB No 1545-0047

Open to Public

	Revenue		File organization may have to			reporting requiren	iciics	Inspection
			ndar year, or tax year beginning Name of organization	10-01-2011 and ending 09-30	0-2012	D Emplo	yer id	entification number
	ieck if a _l dress ch	pplicable	Native American Rights Fund Inc			84-04	- 51187	7.6
			Doing Business As			E Teleph		
	me chai					(303)	447-	8760
_	tıal retui		Number and street (or P O box if mail 1506 Broadway	is not delivered to street address) Ro	oom/suite			\$ 22,563,508
	rmınate		,					
_	nended		City or town, state or country, and ZIP Boulder, CO 80302	+ 4				
Ар	plication	n pending						
			F Name and address of principles of principl	pal officer	H	(a) Is this a group	retur	
			1506 Broadway			affiliates?		⊤Yes ▼ No
			Boulder, CO 80302		H	b) Are all affiliates	includ	ded?
	v ovom	npt status	▼ 501(c)(3)					(see instructions)
				ert no) 4947(a)(1) or 527	н	(c) Group exempt	tion nu	ımber ►
J W	ebsite	e: 🕨 WWW	NARFORG					
K For	m of org	ganization 🔽	Corporation Trust Association	Other 🕨	L	. Year of formation 19	970 I	Y State of legal domicile DC
Pa	rt I	Summ	ary					
Governance		CONSTRU	cribe the organization's mission of the FOUNDATIONS THAT NG TO THEIR NATIVE TRADIT	ARE NECESSARY TO EMPOW				
ş	2	Check this	box 🛏 if the organization disc	ontinued its operations or dispo	osed of mo	re than 25% of its	net a	ssets
	1		voting members of the governing				3	13
Activities &	4 1	Number of	independent voting members of t	the governing body (Part VI, lin	ne 1b) .		4	13
星	5 1	Total numb	per of individuals employed in cal	endar year 2011 (Part V, line 2	2a)		5	37
ş	6	Total numb	per of volunteers (estimate if nec	essary)			6	16
	1		ated business revenue from Part		•		7a	0
	Ь	Net unrela	ted business taxable income fron	n Form 990-T, line 34			7b	
					<u> </u>	Prior Year		Current Year
<u>o</u>	8		tions and grants (Part VIII, line	4,958,		16,104,389		
Revenue	9 10		service revenue (Part VIII, line ent income (Part VIII, column (A	_	1,135, 113,		1,245,587 1,234,986	
Ä	11		venue (Part VIII, column (A), lin		291	35,987		
	12		venue—add lines 8 through 11 (m		_			
						6,239,		18,620,949
	13		nd similar amounts paid (Part IX		—	1,319,		1,330,498
	14		paid to or for members (Part IX,				0	0
8	15	5-10)	, other compensation, employee	penents (Part 1X, Column (A), n	ines	3,440,	496	3,796,584
Expenses	16a	Professi	onal fundraising fees (Part IX, co	lumn (A), line 11e)	. [70,	250	120,000
ੜੇ	ь	Total fund	raısıng expenses (Part IX, column (D), lı	ine 25) • 1,284,359				
	17	Otherex	penses (Part IX, column (A), line	es 11a-11d, 11f-24e)	[1,220,	925	2,286,248
	18	Total ex	penses Add lines 13-17 (must	equal Part IX, column (A), line	25)	6,051,	094	7,533,330
	19	Revenue	less expenses Subtract line 18	from line 12		188,		11,087,619
\$ 5 \$ 0 \$ 0						Beginning of Curre Year	nt	End of Year
10 kg	20	Total as	sets (Part X, line 16)			5,801,	868	17,032,329
Net Assets or Fund Balances	21		bilities (Part X, line 26)		. \vdash	1,534,	-	1,050,857
žÏ	22		ets or fund balances Subtract lin		🗀	4,267,	— t	15,981,472
Pa	rt II	Signa	ture Block		<u>-</u>			
know			ury, I declare that I have examined t is true, correct, and complete. De					
Sigr	า	Signatu	re of officer			Date		
Her			Kennedy CFO					
		Type or	print name and title		,			
		Preparer's	L .	Date	Check self-	ıf Preparer (see ınst		ayer identification number
Paid		signature	7		emplo		.rucuOTE	·1
-	arer's	Firm's nam	e (or yours BKD LLP	<u>'</u>	<u> </u>	EIN ▶		
Use	Only	address, a		300				
		1	Colorado Sarago CO 9			Phone no	o 🕨 (7	719) 471-4290

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

4e

Total program service expenses►\$

5,517,324

			e to any question in this Part III		F
NARI CON RESC	FIN ITS MISSION TO P TINUE TO LEAD NARF I DURCES, (3) THE PROM	E AMERICAN RIGHTS RESERVE AND ENFOR ODAY (1)THE PRESI OTION OF HUMAN RI	FUND'S (NARF) FIRST BOARD (CE THE STATUS OF TRIBES AS ERVATION OF TRIBAL EXISTEN GHTS, (4) THE ACCOUNTABILI DEDUCATING THE PUBLIC ABO	SOVEREIGN, SELF-GOVERN CE, (2) THE PROTECTION O TY OF GOVERNMENTS TO NA	ING BODIES STILL F TRIBAL NATURAL ATIVE AMERICANS,
2		90-EZ?	orogram services during the year was services or services of the year was services or serv		Yes ✓ No
3	Did the organization ceaservices?		e significant changes in how it con-	ducts, any program 	Yes 🔽 No
4		_	complishments for each of its thre	ee largest program services, as	measured by
	expenses Section 501(c)(3) and 501(c)(4) org	ganizations and section 4947(a)(1 nses, and revenue, if any, for each	L) trusts are required to report	
4a	COUNTRY DEVOTING ALL ITS SOVEREIGNTY, THEIR NATU ECONOMIC SELF-SUFFICIEN	S EFFORTS TO DEFENDING A RAL RESOURCES, AND THEIF ICY, AND POLITICAL PARTICI	5,267,067 including grants of \$ FUND (NARF) IS THE OLDEST AND LARGES AND PROMOTING THE LEGAL RIGHTS OF II R HUMAN RIGHTS NARF BELIEVES IN EMF PATION HAVE BEEN SYSTEMICALLY ERODIT T COURT FOR THE DISTRICT OF COLUMB	NDIAN PEOPLE ON ISSUES ESSENTIAL POWERING INDIVIDUALS AND COMMU ED OR UNDERMINED TRIBAL TRUST I	TO THEIR TRIBAL NITIES WHOSE RIGHTS, FUNDS NARF REPRESENTS
	FUNDS SUCH ACCOUNTING REPRESENTED BY NARF IN LITIGATION AGAINST THE FE CASES IN 2010 AND 2011,	S NEVER HAVE BEEN PROVII THIS CASE WERE AMONG TH EDERAL GOVERNMENT BY BE NARF ATTORNEYS, ALONG W	DED BY THE FEDERAL GOVERNMENT WHIC E OVER 90 TRIBES WHO WORKED TO RES GINNING SETTLEMENT NEGOTIATIONS IN ITH ATTORNEYS FOR DOZENS OF OTHER	CH IS THE TRUSTEE FOR THE FUNDS SOLVE EQUITABLY ALL INDIAN TRUST THIS CASE AND OTHER TRIBAL TRUS' TRIBES LITIGATING TRUST ACCOUNT	IN 2009, THE TRIBES FUND MISMANAGEMENT T FUND MISMANAGEMENT ING AND MISMANAGEMENT
	NEGOTIATIONS IN DECEMB CLIENT TRIBES IN THIS CAS AGREEMENTS HAVE BEEN AF	ER 2011, ACTIVE CLAIMS SE E HAVE REACHED SETTLEME PPROVED BY THE FEDERAL D	B HOSTED BY THE PRESIDENT'S APPOINTE TTLEMENT NEGOTIATIONS ON A TRIBE BY INT AGREEMENTS WITH THE UNITED STAT ISTRICT COURT PER THE SETTLEMENT A DICE NARF CONTINUES TO REPRESENT I	TTRIBE BASIS BEGAN FOR MANY TRIB FES TOTALING NEARLY \$400 MILLION AGREEMENTS, ONCE THE TRIBES REC	ES TO DATE, 28 OF NARF'S THESE SETTLEMENT EIVE THEIR SETTLEMENT
	SETTLEMENT NEGOTIATIONS NATIVE CULTURE, LANGUAG SOVEREIGNTY OVER ELEMEN	5 INDIAN EDUCATION IN OC IE & ACCESS FOR SUCCESS INTARY AND SECONDARY EDU	TOBER 2011, THE U.S. SENATE COMMITT IN SCHOOLS (CLASS) ACT, A NEW INDIAN JCATION IN DECEMBER 2011, THE NATIV 3568 WAS REFERRED TO THE HOUSE SU	EE ON INDIAN AFFAIRS PASSED OUT EDUCATION BILL THAT WOULD DRAM E CLASS ACT WAS INTRODUCED INTO	OF COMMITTEE S 1262, THE NATICALLY INCREASE TRIBAL OTHE U.S. HOUSE OF
	INCLUDING AN AUTHORIZAT INCREASED ROLES FOR TRI PROGRAMS IN ADDITION, A	TON FOR A TRIBAL EDUCATI BAL GOVERNMENTS IN PUBLI NFTER OVER 20 YEARS OF W	AND ITS CLIENT THE TRIBAL EDUCATION ON AGENCY PILOT PROJECT, COOPERATING IC SCHOOLS, INCREASED FUNDING FOR TORK, NARF AND TEDNA SECURED THE VED HUMAN SERVICES FISCAL YEAR 2012 AP	VE EDUCATION AGREEMENTS BETWEE FRIBAL EDUCATION AGENCIES AND OT FRY FIRST DIRECT FEDERAL FUNDING	N TRIBES AND STATES, THER INDIAN EDUCATION 5 - \$2 MILLION - FOR TRIBAL
	OF EDUCATION TO BE DISTR ELIGIBLE TRIBAL EDUCATION EDUCATION PROGRAMS IN S	RIBUTED VIA A COMPETITIVE N DEPARTMENTS TO PARTICI SCHOOLS (PUBLIC AND BURE) HUMAN SERVICES FISCAL YEAR 2012 AP : GRANT PROCESS UNDER A NEW STATE IPATE IN A PILOT PROJECT THAT ALLOWS EAU OF INDIAN EDUCATION) LOCATED ON ATED TRIBES OF THE UMATILLA RESERVA	FRIBAL EDUCATION PARTNERSHIPS (" TRIBAL EDUCATION DEPARTMENTS T I INDIAN RESERVATIONS THE NEZ PE	STEP") PROGRAM TO O OPERATE FEDERAL RCE TRIBE, THE NAVAJO
	THE STÉP PROGRAM THE S SCHOOLS, LOCATED ON THE WELFARE ACT NARF REPRES OF THE INDIAN CHILD WELF	TEP PROGRAM WILL ALLOW TER RESPECTIVE RESERVATION OF ALL TERME ACT AND PROVIDE ADD	THESE TRIBES TO MEANINGFULLY PARTIC DNS, THROUGH COLLABORATIVE AGREEME FRIBES IN THE STATE OF MICHIGAN WHO ITIONAL PROTECTIONS FOR TRIBAL SOVE	IPATE IN THE EDUCATION OF THEIR (ENTS WITH STATE EDUCATIONAL AGEI ARE SEEKING STATE LEGISLATION TO REIGNTY IN THEIR STATE THE TRIBE	CHILDREN IN PUBLIC NCIES INDIAN CHILD DENHANCE IMPLEMENTATION IS THROUGH THEIR COURTS
	PRESERVATION ACT WAS PA NATIVE ISSUES FOUR ALASK LIBERTIES UNION (ACLU) RI	ASSED BY THE STATE HOUSE (A NATIVES AND FOUR TRIBA EQUESTED THAT A FEDERAL	JRTS AND STATE AGENCIES TO DRAFT TH OF REPRESENTATIVES AND THE STATE SI AL GOVERNMENTS REPRESENTED BY THE COURT IN WASHINGTON, D C ALLOW TH COVISIONS OF THE VOTING RIGHTS ACT C	ENATE, AND WAS SIGNED INTO LAW E NATIVE AMERICAN RIGHTS FUND AND EM TO JOIN ERIC HOLDER, ATTORNE	Y THE GOVERNOR ALASKA THE AMERICAN CIVIL Y GENERAL OF THE UNITED
	BEEN ONE OF JUST THREE S ALASKA NATIVES AND FOUR THE STATE'S NEGLECT, UNE COURT ORDERS THEM TO D	STATES COVERED IN ITS ENT TRIBAL GOVERNMENTS REP QUAL TREATMENT, AND VIOI O SO, OR THEY FACE THE T	TRETY BY SECTION 4(F)(4) OF THE VOTION RESENT A CROSS-SECTION OF VOTERS W LATIONS OF THE LAW STATE OFFICIALS H HREAT OF A LAWSUIT AS AN EXAMPLE, T	NG RIGHTS ACT THE CASE IS ALASKA WHO CONTINUE TO FACE BARRIERS TO HAVE SHOWN THEY WILL NOT COMPLY HEY FAILED TO IMPLEMENT SECTION	V HOLDER THE FOUR O VOTING AS A RESULT OF WITH THE LAW UNTIL A 203 OF THE VRA FOR MORE
	2012 DISCRIMINATION IN A COAL PROJECT THREATENS AGREEING TO ASSIST THE T	ALASKA IS NOT A THING OF 1 TO DESTROY A VITAL SALMO RIBE IN PROTECTING ITS SU	BLISHED VOTING RIGHTS VIOLATIONS, WA FHE PAST, AND FEDERAL OVERSIGHT OF A BON HABITAT STREAM THAT THE TYONEK BUSISTENCE FISHERIES RESOURCES, LEG BEROUS HOUSE PITS, CULTURAL FEATURI	ALASKA'S ELECTIONS IS NO ACCIDENT ATIVE VILLAGE UTILIZES FOR SUBSIST AL RESEARCH ESTABLISHED THAT MU	THE MASSIVE CHUITNA TENCE FISHERIES AFTER CH MORE WAS AT STAKE AS
	SUCH CIRCUMSTANCES THE CONTACT THE IMPACTED TO BE GRANTED THE OPPORTU PROPERTIES, INCLUDING TO	E NATIONAL HISTORIC PRESE RIBE TO SEEK CONSULTATIO NITY TO IDENTIFY ITS CONC HOSE OF TRADITIONAL RELIC	ERVATION ACT REQUIRES THAT THE FEDE N REGARDING THE PROTECTION OF THE CERNS ABOUT HISTORIC PROPERTIES, AD GIOUS AND CULTURAL IMPORTANCE, ARTI	ERAL AGENCY TASKED WITH JURISDIC HISTORIC RESOURCES UNDER EXIST VISE ON THE IDENTIFICATION AND EV ICULATE ITS VIEWS ON THE UNDERTA	TION IMMEDIATELY ING LAW TYONEK SHOULD VALUATION OF HISTORIC KING'S EFFECTS ON SUCH
	COUNCIL, THE STATE HISTO NATIONAL HISTORIC PRESEI COMMITMENTS FROM EPA,	RIC PRESERVATION OFFICE RVATION ACT ISSUES NARF NOAA, DEPARTMENT OF THE	FADVERSE EFFECTS NARF HAS ENGAGED , THE NATIONAL PARK SERVICE AND OTH ALSO MET IN WASHINGTON, D C WITH T EINTERIOR, NPS, NHPC, AND THE WHITE N IS ADHERED TO AS OCEAN TEMPERATU	ERS TO EFFECTIVELY ENGAGE THE AR OP AGENCY PERSONNEL IN OCTOBER HOUSE COUNSEL ON NATIVE AMERIC	MY CORP OF ENGINEERS ON AND RECEIVED SIGNIFICANT AN AFFAIRS TO MONITOR
	ARE MOVING NORTH COMM SEA AND THE LARGE SCALE FLEETS EMPLOY BOTTOM TR EVERYTHING IN THEIR PATH	HERCIALLY VALUABLE FISH THE FISHING FLEETS ARE PLANN AWLING, A HIGHLY DESTRUG NEVERTHELESS, THE NOR	HAT HAVE TRADITIONALLY BEEN IN THE G ING TO FOLLOW THEM AND EXPAND THEI CTIVE PRACTICE IN WHICH WEIGHTED NI TH PACIFIC FISHERY MANAGEMENT COUN	ULF OF ALASKA ARE SHIFTING TOWA R OPERATIONS INTO THIS HIGHLY SE ETS ARE DRAGGED INCHES ABOVE TH NCIL (NPFMC) CURRENTLY ALLOWS BO	RD THE NORTHERN BERING NSITIVE ECOSYSTEM THESE E SEA FLOOR, REMOVING DTTOM TRAWLING IN THE
	PROCESS TO CONSIDER WH ENDANGERED SPECIES SUC STEWARDS OF THIS DIVERS	ETHER TO ALLOW THESE FLI H AS THE STELLER SEA LION E ECOSYSTEM FOR CENTUR	EFFECT ON SENSITIVE HABITAT AND LOCA EETS TO EXPAND INTO THE NORTHERN BI AND THE SPECTACLED EIDER, AND MANY IES THE BERING SEA ELDERS GROUP (BS OF THE BERING SEA, THE SUBSISTENCE LI	ERING SEA, HOME TO THREATENED S 7 ISOLATED YUP'IK AND INUPIAQ VILL SE) IS AN ALLIANCE OF THIRTY NINE Y	PECIES LIKE THE WALRUS, AGES WHO HAVE BEEN THE 'UP'IK AND INUPIAQ VILLAGES
	IT NARF HAS DESIGNED A (MORE ENGAGED IN ITS MAN ABORIGINAL RIGHTS THAT T	COMPREHENSIVE PLAN TO HI IAGEMENT NARF HAS BEEN THE ELDERS GROUP AND ITS	ELP THIS GROUP OF ALASKA NATIVE VILLA WORKING WITH THE ELDERS GROUP ON CONSTITUENT TRIBES MAY POSSESS BAS GOTIATIONS WITH THE TRAWL FIS	AGES IN THEIR EFFORTS TO PROTECT BOTH ISSUES AND WE HAVE (1) RES	THE AREA AND BECOME EARCHED POTENTIAL
4b	PROVIDING, FREE TO THE P WEB SITE IN ADDITION, NI	UBLIC, UPDATES ON INDIAN LL PROVIDES RESEARCH AND	250,257 including grants of \$ FILL NARF'S FIFTH PRIORITY, THE DEVELO LAW, RESEARCH ASSISTANCE AND DOCU DINFORMATION SUPPORT TO NARF SO TH	JMENT DELIVERY, AND UNIQUE AND V HAT IT CAN CARRY OUT ITS OTHER FO	ALUABLE RESOURCES ON ITS OUR PRIORITIES AND
	LAW INDEX COLLECTION OF VISITORS, WITH ABOUT 8,00 ARCHITECTURE FOR THE OI INDIVIDUAL TRIBE'S PAGES	TRIBAL LAWS CONTINUES T DO PAGE VISITS PER MONTH NLINE TRIBAL LAW COLLECTI HAVE BEEN LAUNCHED WE I	THAN 300 PARTICIPATING TRIBES, NARF'S O GROW WEB USE STATISTICS SHOW TH TO ACCOMMODATE THIS GROWTH AND ION THE NEW TRIBAL LAW GATEWAY WAS PLAN TO ROLL OUT ALL OF THE REMAININ	IAT THE ONLINE TRIBAL LAW COLLECT INCREASE USABILITY, NILL HAS DEVEI 5 RELEASED IN AUGUST AND AS OF O G TRIBAL PAGES OVER THE NEXT SEV	IÓN IS SEEING MORE LOPED AN IMPROVED CTOBER 15, MORE THAN 180 ERAL MONTHS EACH TRIBE
	AND WHERE THEY CAN BE F NATIONAL CONGRESS OF AN NATIONAL INVENTORY PROJ INVENTORY PROCESS UTILIX BEING PRESERVED NILL IS	OUND NILL IS ALSO WORKI MERICAN INDIANS ON A NATI ECT WHICH INCLUDES PROV ZES VOLUNTEERS TO DETERI	BAL LAW MATERIALS - FROM CODES AND NG WITH THE AMERICAN ASSOCIATION O IONAL TRIBAL LAW INVENTORY PROJECT ITDING AND PRESERVING FREE PUBLIC AC MINE WHAT INFORMATION IS AVAILABLE, FRS TO DETERMINE WHAT INFORMATION RIBAL GOVERNMENTS	F LAW LIBRARIES, LAW LIBRARY OF C THE TRIBAL LAW INVENTORY PROJEC CCESS TO FEDERAL, STATE AND MUNI WHETHER THIS INFORMATION IS OFF	ONGRESS AND THE IT IS PART OF THE LARGER ICIPAL PRIMARY LAW THE FICIAL AND WHETHER IT IS
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
					
_					
4d	Other program service (Expenses \$		e O) g grants of \$) (Revenue \$	

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f g}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	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? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	 I
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	<u> </u>
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	ı
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	1
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, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		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		Νo
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, Part I	14b		Νo
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part 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	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 hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		_

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes,"	200		INO
	complete Schedule L, Part IV	28b		N o
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 owner? If "Yes," complete Schedule L, Part IV .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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</i> "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$?	35a		No
b	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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

Enter the number reported in Box 3 of Farm 1096 Enter .0 - rised applicable Enter the number of Forms W-20 included in line 1 a. Ector-0 - rised applicable Define the number of Forms W-20 included in line 1 a. Ector-0 - rised applicable Define the number of Forms W-20 included in line 1 a. Ector-0 - rised applicable Define the number of Forms W-20 included in line 1 a. Ector-0 - rised applicable Define the number of Forms W-20 included in line 1 a. Ector-0 - rised applicable Define the number of Forms W-20 included in line 1 a. Ector-0 - rised applicable Define the number of Forms W-20 - rised applicable Define the number of Forms W-20 - rised applicable Define the number of Forms W-20 - rised applicable Define the number of Forms W-20 - rised applicable Define the number of Rised Applicable Define the number		Check if Schedule O contains a response to any question in this Part V	•	•1	
b Enter the number of Forms W-1G included in line 1.a Enter-0- if not applicable D bid the organization comply with backup withholding rules for reportable payments to vendom and reportable generic gloanblogs with raises to prize winters? Inter the number of employees reported on Form 0-1, interest of without the level of vendom 1.7 miles of the properties of the control of th				Yes	No
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Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state b Enter the aggregate 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 aggregate amount of reserves on hand 13b 13b 13c 4a Did the organization receive any payments for indoor tanning services during the tax year?	2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state b Enter the aggregate 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 aggregate amount of reserves on hand 13a 13b 13b 13c 14a	b	1 1 2 1 1			
Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state b Enter the aggregate 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 aggregate amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year?	3	year			
qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state b Enter the aggregate 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 aggregate amount of reserves on hand 13c 4a Did the organization receive any payments for indoor tanning services during the tax year?		Is the organization licensed to issue qualified health plans in more than one state?			
b Enter the aggregate 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 aggregate amount of reserves on hand 13c 4a Did the organization receive any payments for indoor tanning services during the tax year?		qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	13a		
c Enter the aggregate amount of reserves on hand 13c 4a Did the organization receive any payments for indoor tanning services during the tax year?	b	Enter the aggregate amount of reserves the organization is required to maintain by			
4a Did the organization receive any payments for indoor tanning services during the tax year? 14a	С	Enter the aggregate amount of reserves on hand			
		13c	44-		NI -
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			-		No

Form 990 (2011) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for Part VI a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax 1a 13 Enter the number of voting members included in line 1a, above, who are 1b 13 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any Νo 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? .. 5 Νo 6 6 Νo 7a 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 or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes 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 organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Νo Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a 10a Did the organization have local chapters, branches, or affiliates? . Nο **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes the form? **b** Describe in Schedule O the process, if any, used by the organization to review the Form 990 . **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes b Were officers, directors or trustees, and key employees required to disclose annually interests that could give Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes Did the organization have a written whistleblower policy? 13 Yes 13 14 14 Did the organization have a written document retention and destruction policy? 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 Other officers or key employees of the organization . 15b Yes If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 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 organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CT, DE, FL, GA, HI, IL, 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)

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

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

◆ 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

(A) Name and Title	(B) Average hours per week (describe hours		C) o no n one son er ar	t che e box is bo nd a stee)	eck x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related	
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		,	organizations
(1) GERALD DANFORTH CHAIRMAN	1 0	Х						0	0	0
(2) KUNANI NIHIPALI VICE-CHAIRMAN	1 0	х						0		0
(3) NATASHA V SINGH VICE-CHAIRMAN	1 0	х						0		0
(4) RICHARD LUARKIE BOARD MEMBER	1 0	х						0		0
(5) MARSHALL MCKAY BOARD MEMBER	1 0	х						0		0
(6) VIRGINIA CROSS BOARD MEMBER	1 0	х						0		0
(7) MIKO BEASLEY DENSON BOARD MEMBER	1 0	х						0		0
(8) BARBARA SMITH BOARD MEMBER	1 0	х						0		0
(9) MARK MACARRO BOARD MEMBER	1 0	х						0		0
(10) BUFORD L ROLIN BOARD MEMBER	1 0	х						0		0
(11) RON HIS HORSE IS THUNDER BOARD MEMBER	1 0	х						0		0
(12) MOSES K N HAIA III BOARD MEMBER	1 0	х						0		0
(13) JULIE ROBERTS-HYSLOP BOARD MEMBER	1 0	х						0		0
(14) GARY HAYES BOARD MEMBER	1 0	х						0		0
(15) STEPHEN R LEWIS BOARD MEMBER	1 0	х						0		0
(16) PETER M PINO BOARD MEMBER	1 0	Х						0		0
(17) JOHN ECHOHAWK EXECUTIVE DIRECTOR	40 0			Х				181,757		32,394

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

	(A) Name and Title	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	C	(F) Estima nount o ompens from t	ited f other sation the on and
		hours for related organizations in Schedule O)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	0	relati rganıza	
٠,	MICHAEL KENNEDY FINANCIAL OFFICER	40 0			х				105,52	8			20,903
	AY RAMIREZ DRATE SECRETARY	40 0			х				79,54	8			14,674
	ORGAN O'BRIEN OPMENT DIRECTOR	40 0			х				101,81	0			29,998
	MELODY MCCOY TION MGMT COMMITTEE	40 0			х				146,01	7			35,865
	IM GOTTSCHALK TION MGMT COMMITTEE	40 0			х				153,89	6			29,712
	IATALIE LANDRETH TION MGMT COMMITTEE	40 0			х				123,17	8			12,552
(24) [ATTOR	OON WHARTON RNEY	40 0					х		156,89	7			16,251
(25) S ATTOR	TEVEN MOORE NEY	40 0					Х		151,05	7			33,001
(26) H ATTOR	IEATHER KENDALL RNEY	40 0					Х		149,15	8			21,873
(27) F ATTOF	ICHARD GUEST NEY	40 0					Х		135,01	8			18,188
(28) [ATTO	DAVID GOVER RNEY	40 0					Х		102,35	5			28,633
1b						•							
- c	Total from continuation sheets total (add lines 1b and 1c)	o Part VII, Sec	tion A		•	•		•	1,586,219		0		294,044
<u>u</u>	Total number of individuals (inclu	ıdıng but not lım	ited to	thos	e lıs	ted a	above	·) who			<u> </u>		231,011
	\$100,000 of reportable compens	sation from the o	organıza	ation i	- 11								
												Yes	No
3	Did the organization list any forn on line 1a? <i>If</i> "Yes," complete Sch							ee, d	or highest compen	sated employee			NI -
4	For any individual listed on line 1							and	other compensation	on from the	3		No_
	organization and related organiza	-	an \$15	0,00	0? İ	f "Yo	es," co 	mple -	ete Schedule J for s	uch	4	Yes	
5	Did any person listed on line 1a i		e comp	ensa	tıon	fron	n any i	unre	lated organization	or individual for	-	165	
	services rendered to the organiza	ation? <i>If</i> "Yes," o	complete	e Scho	edule	e J fo	or suct	per:	son		5		No
Se	ction B. Independent Cont	ractors											
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax ye	highest compen the organization											
(A) (B)								(C Comper					
7 ESS	Y HILL ADVISORS EX GREEN DRIVE 53-55 DY, MA 01960									EGAL CASES		·	129,148
											+		
											#		
	otal number of independent contr \$100,000 of compensation from tl			ot lım	nited	l to t	those	liste	l d above) who rece	ived more than			

Pait v	<u> </u>	Statement of Rev	venue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
## #	1a	Federated campaigns	1a	75,811				
호호	ь	Membership dues .	1b					
ე.	c	Fundraising events .	1c					
ž.	d	Related organizations	1d					
% ∰.	e	Government grants (contri	ibutions) 1e	13,618,849				
등등	f	All other contributions, gift		2,409,729				
돌		sımılar amounts not ınclud	ed above					
計る	g	Noncash contribution						
Contributions, gifts, grants and other similar amounts	h	lines 1a-1f \$ Total. Add lines 1a-1		▶	16,104,389			
Ų 10	"				. ,			
e⊒]	LEGAL FEES		Business Code				
že.	2a	LEGAL FEES		900099	1,245,587	1,245,587		
튦	b							
45.e	C							
<u> </u>	d							
Ē	e							
Program Serwce Revenue	f	All other program ser	vice revenue					
<u>ک</u>	g	Total. Add lines 2a-2	l 2 f		1,245,587			
	3	Investment income (i			1,213,307			
		and other similar amo		. F	55,197			55,197
	4	Income from investment of	· · · · · · · · · · · · · · · · · · ·	· · ·	0			
	· 5	Royalties			1,517			1,517
			(ı) Real	(II) Personal				
	6a	Gross rents	10,185					
	ь	Less rental						
	_c	expenses Rental income	10,185					
		or (loss)	,	<u> </u>	10,185			10,185
	d	Net rental income or i		-	10,183			10,165
	7a	Gross amount (1)	Securities 3,712,348	(II) Other 1,410,000				
	′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′	from sales of assets other	2,. 22,3 10	1,.10,000				
		than inventory						
	Ь	Less cost or other basis and	3,719,412	223,147				
		sales expenses	7.064	4 400 050				
	c c	Gain or (loss)	-7,064	1,186,853	1,179,789			1,179,789
	d	Net gain or (loss).	1	· · · · · · · ·	1,179,789			1,179,789
ψ	8a	Gross income from fu events (not including						
Other Revenue		\$of contributions repor See Part IV, line 18	ted on line 1c)					
Œ		·	a					
₽ E	ь	Less direct expenses	s b					
δ	c	Net income or (loss) f	from fundraising e	events 🕨	o			
	9a	Gross income from ga See Part IV, line 19						
	ь	Less direct expenses	s b					
	c	Net income or (loss) i		vities►	o			
	10a	Gross sales of invent returns and allowance	ory, less					
	b c	Less cost of goods s Net income or (loss) t	old b	entory ►	o			
		Miscellaneous Reve		Business Code				
	11a	REIMBURSEMENTS		900099	10,179	10,179		
	ь	HONORARIUMS		900099	2,450	2,450		
	c	NARF PUBLICATION	, 	900099	786	786		
	d	All other revenue .			10,870	10,870		
	e	Total. Add lines 11a-	L		24,285			
	12	Total revenue. See In	structions	. ▶	18,620,949	1,269,872		1,246,688

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

<u>C</u>	heck if Schedule O contains a response to any question in this Part IX	<u> </u>			
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,330,498	1,330,498		
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	1,137,629	711,386	243,226	183,017
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	1,998,719	1,620,923	246,954	130,842
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	110,442	75,039	29,723	5,680
9	Other employee benefits	354,913	297,770	14,272	42,871
10	Payroll taxes	194,881	131,067	31,590	32,224
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
c	Accounting	27,350		27,350	
d	Lobbying	30,500	30,500		
e	Professional fundraising See Part IV, line 17	120,000			120,000
f	Investment management fees	16,102		16,102	
g	Other	450,486	450,079	305	102
12	Advertising and promotion	6,050			6,050
13	Office expenses	519,354	194,733	42,018	282,603
14	Information technology	75,352	57,337	5,576	12,439
15	Royalties	0			
16	Occupancy	241,773	209,909	20,718	11,146
17	Travel	338,177	257,708	41,551	38,918
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	18,291	13,285	436	4,570
20	Interest	9,296	3,366	5,442	488
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	50,707	37,080	4,945	8,682
23	Insurance	15,096	13,420	1,135	541
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	DIRECT MARKET MAILINGS	403,641	0	0	403,641
b	LIBRARY	40,651	39,802	304	545
c	BAD DEBT	31,630	31,630	0	0
d e	COSTS RELATED TO LEGAL CASES	11,792	11,792	0	0
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	7,533,330	5,517,324	731,647	1,284,359
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	,,,,,,,,	3,317,324		
				Fo	rm 990 (2011)

Part X **Balance Sheet** (A) (B) End of year Beginning of year 109,150 812,047 1 1 207.932 5.404.508 2 2 3 1,398,973 4.927.327 337,480 578.025 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 0 6 0 0 7 0 20,000 8 9 82,862 9 85.398 Prepaid expenses and deferred charges 10a 1,148,320 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 977,805 b Less accumulated depreciation 268,612 **10c** 170,515 1,759,965 11 2,653,275 11 2,393,105 12 1,609,155 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 0 14 0 14 7,739 15 8,129 15 5,801,868 17,032,329 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 725,294 17 780,386 17 Accounts payable and accrued expenses . 18 0 18 0 19 0 19 849 20 0 20 ٥ 0 21 21 0 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 0 22 594.256 34.068 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 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 214,484 25 235,554 D 26 26 1,534,034 1,050,857 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 2,499,244 27 Unrestricted net assets 11,441,757 826, 162 28 3,591,993 28 Temporarily restricted net assets Fund 29 942,428 29 947,722 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 4.267.834 33 15.981.472 34 Total liabilities and net assets/fund balances 5.801.868 17,032,329

Par	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		186	520,949
2	Total expenses (must equal Part IX, column (A), line 25)	2			533,330
3	Revenue less expenses Subtract line 2 from line 1	3			087,619
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,2	267,834
5	Other changes in net assets or fund balances (explain in Schedule O)	5		6	526,019
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		15,9	81,472
Par	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1		I		Yes	No
•	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

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As Filed Data -

DLN: 93493036009493

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Native American Rights Fund Inc

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

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

Employer Ide

Employer identification number 84-0611876

Pai	rt I	Reas	on for Pu	blic Charity Sta	tus (All org	ganızatıons	must comp	lete this p	art.) See in		
The c	rganı	zatıon ıs	not a privat	te foundation becaus	eitis (Forl	ınes 1 throu	gh 11, check	only one bo	x)		
1	Γ	A chur	ch, convent	on of churches, or a	ssociation of	churches s	ection 170(b)(1)(A)(i).			
2	Γ	A scho	ol described	in section 170(b)(1	l)(A)(ii). (At	tach Schedu	ıle E)				
3	\sqcap	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descrı	bed in sectio	n 170(b)(1)	(A)(iii).		
4	Γ			h organızatıon opera ity, and state	ted in conjun	ction with a	hospital desc	ribed in sec	tion 170(b)(:	1)(A)(iii). Er	nter the
5	Γ	=	· ·	erated for the benefi (A)(iv). (Complete P	_	or universit	y owned or o	perated by a	government	al unit descr	ibed in
6	Г			local government o		al unit desci	ribed in secti o	on 170(b)(1)(A)(v).		
7	<u>\</u>	An orga describ	anızatıon tha ed ın	at normally receives	a substantia					om the gene	ral public
	_			(A)(vi) (Complete P		A Muil (Com	anlata Bart II	١			
8 9	<u>'</u>			described in sectior at normally receives					uitione mam	herchin food	and gross
9	'	_		rities related to its e	` '		• •		•	•	· -
				oss investment inco							
				ganization after June						.ax) IIOIII bus	oniesses
10	\vdash			ganized and operated	•			•	•		
11	<u>'</u>									n carry out th	ne nurnoses of
	,	An organization organized and operated exclusively for the benefit of, to perform the functions one or more publicly supported organizations described in section 509(a)(1) or section 509(the box that describes the type of supporting organization and complete lines 11e through 1: a Type I b Type II c Type III - Functionally integrated							509(a)(2) Se gh 11h	ee section 50	
е	Γ	othert		ox, I certify that the on managers and ot							
f		If the o	rganization this box	received a written d						II supportin	g organization,
g		followir	ng persons?	2006, has the organ rectly or indirectly c							Yes No
				governing body of th						11g(i)
				er of a person descri						11g(
		(iii) a 3	35% control	led entity of a perso	n described i	ın (ı) or (ıı) a	bove?			11g(i	ii)
h 		Provide	the followi	ng information about	the supporte	ed organızatı	on(s)				
(i Nam suppo organi:		e of (ii) orted EIN				on in ced in rning	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organizati col (i) orga in the U	on in anized	(vii) A mount of support?
				instructions))	Yes	No	Yes	No	Yes	No	
Total											

Support Schedule for Organizations Described in IRC 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.)

-54	ection A. Public Support	. organization	idilə to qualify d	macr the tests	iistea below, pie	case complete	raic III.)
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,067,62	7 2,471,678	4,883,293	4,958,526	16,104,389	32,485,513
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit						
4 5	Total. Add lines 1 through 3 The portion of total contributions	4,067,62	7 2,471,678	4,883,293	4,958,526	16,104,389	32,485,513
J	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						1,737,543
6	(f) Public Support. Subtract line 5 from line 4						30,747,970
-54	ection B. Total Support				L		
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	4,067,627	2,471,678	4,883,293	4,958,526	16,104,389	32,485,513
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	236,817	163,021	99,457	71,125	66,899	637,319
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11	Total support (Add lines 7 through 10)						33,122,832
12	Gross receipts from related activiti					12	9,427,382
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	ion's first, second	, thırd, fourth, or f	Ifth tax year as a	501(c)(3) organ	ization, ▶┌
S	ection C. Computation of Pub						
14	Public Support Percentage for 201	1 (lıne 6 column	(f) divided by line	11 column (f))		14	92 830 %
15	Public Support Percentage for 201	O Schedule A , Pa	art II, line 14			15	84 045 %
	33 1/3% support test—2011. If the and stop here. The organization qua	alifies as a public	ly supported orga	nızatıon			▶ ▼
	33 1/3% support test—2010. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization meeorganization	n qualifies as a p — 2011. If the org tion meets the "	ublicly supported janization did not o facts and circumst	organization check a box on lin cances" test, chec	e 13, 16a, or 16b ck this box and st	o and line 14 o p here. Explain	► □
b	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ						- 1
18	Explain in Part IV how the organiza supported organization Private Foundation If the organization	tion meets the "	facts and circumst	ances" test The	organızatıon qual	lifies as a publicl	▶ □
	instructions		•				▶ ┌

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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 Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not 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 Gross receipts from activities that are not an unrelated trade or 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 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a 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 C Net income from unrelated 11 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, 13 11 and 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 this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).						
	Facts And Circumstances Test						
	Explanation						

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493036009493

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.

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

Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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

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

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

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

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

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

Native American Rights Fund Inc	Employer identification number
Part I-A Complete if the organization is exempt under section 501(c) or is a	84-0611876 section 527 organizatior

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of in opposition to candidates for public office in Part IV	or	
2	Political expenditures	F	\$
3	Volunteer hours		

1	Enter the amount of any excise tax incurred by the organization under section 4955	•	\$ 	
2	Enter the amount of any excise tax incurred by organization managers under section 4955	•	\$	
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		☐ Yes	┌ No
4a	Was a correction made?		☐ Yes	┌ No
_				

b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	F	\$_	
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	.	\$_	
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	-	\$	
4	Did the filing organization file Form 1120-POL for this year?		_	┌ Yes ┌ No

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a

separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter -0-

Sc	hedule C	(Fo	m 990 or 990-EZ) 2011		Page :				
E	art II-A		Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).						
Ā	Check	Γ	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated grexpenses, and share of excess lobbying expenditures)	oup member's name	, address, EIN				
В	Check		ıf the filing organization checked box A and "limited control" provisions apply						
			Limits on Lobbying Expenditures	(a) Filing Organization's	(b) Affiliated				

	Limits on Lobbying E (The term "expenditures" means a		(a) Filing Organization's Totals	(b) Affiliated Group Totals
а	Total lobbying expenditures to influence public of	ppinion (grass roots lobbying)	2,984	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	44,616	
c	Total lobbying expenditures (add lines 1a and 1	o)	47,600	
d	Other exempt purpose expenditures		7,485,730	
е	Total exempt purpose expenditures (add lines 1	7,533,330		
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	526,667	
	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		
		<u> </u>		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	131,667	
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	er -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes	No

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total		
2a	Lobbying non-taxable amount	508,311	507,481	452,555	526,667	1,995,014		
_ b	Lobbying ceiling amount (150% of line 2a, column(e))					2,992,521		
_с	Total lobbying expenditures	149,888	101,903	52,100	47,600	351,491		
d	Grassroots non-taxable amount	127,078	126,870	113,139	131,667	498,754		
е 	Grassroots ceiling amount (150% of line 2d, column (e))					748,131		
f	Grassroots lobbying expenditures	7,678	11,528	0	2,984	22,190		

_	edule C (Form 990 or 990-EZ) 2011				Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768
		((a)		b)
		Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i		_		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sect	tion
			_	Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

Part IV Supplemental Information

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

Identifier | Return Reference | Explanation

► Attach to Form 990. ► See separate instructions.

DLN: 93493036009493

OMB No 1545-0047

SCHEDULE D (Form 990)

Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Department of the Treasury Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Open to Public Inspection

Name of the organization

Employer identification number

Organizations Maintaining Donor Advised Funds or Other Similar organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal controls	donor advorany others" to Forn	(b) Funds and	other account	
organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control and the organization and the organization's exclusive legal control and the organization and the organization's exclusive legal control and the organization's exclusive legal cont	donor advorance of the control of th	(b) Funds and	other account	nts No
(a) Donor advised funds Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control?	donor adv ? nds may b or any othe s" to Form	vised be er purpose	┌ Yes	┌ No
Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control?	donor adv ? nds may b or any othe s" to Form	vised be er purpose	┌ Yes	┌ No
Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control?	onds may bor any others" to Forn	be er purpose	┌ Yes	_
Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control?	onds may bor any others" to Forn	be er purpose	┌ Yes	_
Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control?	onds may bor any others" to Forn	be er purpose	┌ Yes	_
Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control?	onds may bor any others" to Forn	be er purpose	┌ Yes	_
	nds may bor any others s" to Forn f an histor	er purpose	┌ Yes	_
	or any others" to Forn	er purpose		□ N-
Did the organization inform all grantees, donors, and donor advisors in writing that grant fu- used only for charitable purposes and not for the benefit of the donor or donor advisor, or for conferring impermissible private benefit	fan histoi	m 990, Part I	\/ line 7	, 140
Conservation Easements. Complete if the organization answered "Yes			v, iiie 7.	
Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the fo		ed historic strud		ì
easement on the last day of the tax year				
		Held at the	e End of the	Year
Total number of conservation easements	2a			
Total acreage restricted by conservation easements	2b			
Number of conservation easements on a certified historic structure included in (a)	2c			
Number of conservation easements included in (c) acquired after 8/17/06	2d			
Number of conservation easements modified, transferred, released, extinguished, or terming the taxable year ▶	nated by t	the organization	during	
Number of states where property subject to conservation easement is located 🛌				
Does the organization have a written policy regarding the periodic monitoring, inspection, being the conservation easements it holds?	nandling o	of violations, an	d Yes	┌ No
Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation eas	sements c	during the year	.	
A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easem				
► \$		ig the year		
Does each conservation easement reported on line 2(d) above satisfy the requirements of $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	section		┌ Yes	┌ No
In Part XIV, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the text of the footnote to the organization's finan the organization's accounting for conservation easements				
Organizations Maintaining Collections of Art, Historical Treasure Complete if the organization answered "Yes" to Form 990, Part IV, line 8	s, or Ot	ther Similar	Assets.	
If the organization elected, as permitted under SFAS 116, not to report in its revenue state art, historical treasures, or other similar assets held for public exhibition, education or resprovide, in Part XIV, the text of the footnote to its financial statements that describes these	ement and earch in fi			·,
If the organization elected, as permitted under SFAS 116, to report in its revenue stateme historical treasures, or other similar assets held for public exhibition, education, or research provide the following amounts relating to these items				
(i) Revenues included in Form 990, Part VIII, line 1		► \$		
(ii) Assets included in Form 990, Part X				
If the organization received or held works of art, historical treasures, or other similar asset following amounts required to be reported under SFAS 116 relating to these items	ts for finar			
Revenues included in Form 990, Part VIII, line 1				

b Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Co	llections of Art	<u>, Hist</u>	orical 1	reasu	res, or Ot	<u>ther</u>	<u>Similar Asse</u>	ts (cc	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of the	following	that are	e a significa	nt use	e of its collection		
а	Public exhibition		d	┌ Loai	norexch	hange progra	ams			
b	Scholarly research		e	▽ Oth	er ASSI	ST IN RES	EARC	H - CLIENT CAS	SES	
c	Preservation for future generations									
4	Provide a description of the organization's control Part XIV	ollections and expla	ın how	they furtl	ner the o	organization'	s exe	mpt purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								Yes	√ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					n answered	l "Ye	s" to Form 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	diary f	or contrib	outions c	or other asse	ets no	t F	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	followu	ng table		Г	T	Amou	nt	
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 Fe	orm 990. Part X. line	21?			<u> </u>		Γ,	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV							,		,
	rt V Endowment Funds. Complete		ansv	vered "Y	es" to f	Form 990	Part	TV line 10		
	Endownient Funds. Complete	(a)Current Year		nor Year		o Years Back) Four Y	ears Back
1a	Beginning of year balance	1,768,590		2,404,01		985,392		5,007,620		
b	Contributions	3,627,190		649,85	50	1,706,805		278,721		
c	Investment earnings or losses									
d	Grants or scholarships									
e	Other expenditures for facilities and programs	856,065		1,285,27	'3	288,184		4,300,949		
f	Administrative expenses									
g	End of year balance	4,539,715		1,768,59	90	2,404,013		985,392		
2	Provide the estimated percentage of the year	r end balance held a	ıs							
а	Board designated or quasi-endowment 🕨	0 %								
b	Permanent endowment 🕨 20 880 %									
С	Term endowment ► 79 120 %									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation th	nat are he	ld and a	dministered	for th	ie		
	organization by								Yes	No
	(i) unrelated organizations						•	3a(i)		No
	(ii) related organizations							3a(ii)		No
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•			· · ·		•	3b		<u> </u>
4 Doc					10					
Feli	t VI Land, Buildings, and Equipme	int. See Follii 99	u, Pai			T	.			
				(a) Cost		(b)Cost or o basis (othe		(c) Accumulated depreciation	(d) Bo	ook value
	Description of property			basıs (ınv	esument)	basis (otile		· ·		JOK Value
1a l	Description of property Land			basis (inv	esument)	<u> </u>	937	·		58,937
				basis (inv	esument)	58,	937	80,000		58,937
b i	Land			basis (inv	esumenit	58,		80,000		
b 6	Land			basis (inv	esument)	58,		80,000 579,734		58,937
b 6 c 1 d 6	Land	· · · · · · · · · · · · · · · · · · ·				58, 80, 662,	,000	,		58,937

Part VIII Investments—Other Securities. See F	orm 990, Part X, line 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) HEDGE FUND	2,193,105	F
(B) PREFERRED STOCK	200,000	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	2,393,105	
Part VIII Investments—Program Related. See	Form 990, Part X, line :	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin	e 15.	
(a) Descrip		(b) Book value
		<u> </u>
T. 1 (0) (1)	-	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15		<u> </u>
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25. (b) Amount	
Federal Income Taxes	0	
RETIREMENT OBLIGATION	235,554	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	235,554	

Pai	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	1ts_	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	18,620,949
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,533,330
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	11,087,619
4	Net unrealized gains (losses) on investments	4	626,019
5	Donated services and use of facilities	5	110,300
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	736,319
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	11,823,938
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	19,357,268
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	736,319
3	Subtract line 2e from line 1	3	18,620,949
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	18,620,949
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	7,643,630
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	110,300
3	Subtract line 2e from line 1	3	7,533,330
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
_ C	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	7,533,330

Part XIV Supplemental Information

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

additional information		
Identifier	Return Reference	Explanation
PART III, LINE 1A	IF ELECTED UNDER SFAS 116 PROVIDE FOOTNOTE FROM FINANCIAL STATEMENTS	COLLECTIONS OF WORKS OF ART, HISTORICAL TREASURES, AND SIMILAR ASSETS ARE NOT CAPITALIZED IN AS MUCH AS THE ITEMS ARE PRESERVED AND CARED FOR CONTINUOUSLY PURCHASES OF COLLECTION ITEMS ARE REPORTED IN THE YEAR OF ACQUISITION AS DECREASES IN UNRESTRICTED NET ASSETS, OR IN TEMPORARILY OR PERMANENTLY RESTRICTED NET ASSETS IF THE ASSETS USED TO PURCHASE THE ITEMS WERE RESTRICTED TO THAT USE BY DONOR STIPULATION CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT REPORTED IN THE FINANCIAL STATEMENTS PROCEEDS FROM DISPOSAL OF AND INSURANCE RECOVERIES RELATED TO COLLECTION ITEMS ARE REPORTED AS INCREASES IN THE APPROPRIATE NET ASSET CLASSES NARF'S COLLECTIONS CONSIST OF RARE BOOKS AND MAPS THESE COLLECTIONS ARE HELD FOR EDUCATIONAL AND RESEARCH PURPOSES THEY ARE SUBJECT TO A POLICY THAT REQUIRES PROCEEDS FROM THE DISPOSITION OF COLLECTION ITEMS TO BE USED TO ACQUIRE OTHER COLLECTION ITEMS
PART III, LINE 4	THE EXEMPT PURPOSE	COLLECTIONS CONSIST OF RARE BOOKS AND MAPS THESE COLLECTIONS ARE HELD FOR EDUCATIONAL AND RESEARCH PURPOSES, WHICH ARE USED IN TECHNICAL ASSISTANCE AND EDUCATING THE PUBLIC ABOUT INDIAN RIGHTS, LAWS, AND ISSUES
PART V, LINE 4	DESCRIBE THE INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS	THE ENDOWMENT ASSETS INCLUDE ONLY DONOR- RESTRICTED ENDOWMENT FUNDS HELD IN PERPETUITY OR FOR DONOR-SPECIFIED PERIODS RETURNS GENERATED BY THE ENDOWMENT ASSETS ARE UNRESTRICTED IN ACCORDANCE WITH DONOR STIPULATIONS AND ARE USED TO SUPPORT PROGRAMS AND SUPPORTING OPERATIONS
PART X, LINE 2	UNCERTAIN TAX POSITIONS	MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740 BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS

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As Filed Data -

DLN: 93493036009493

OMB No 1545-0047

Department of the Treasury

(Form 990 or 990-EZ)

SCHEDULE G

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.

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public

Internal Revenue Service	Attac	h to Form 990 or For	m 990-EZ. 🟲 See separate instruc	tions.	Inspection
Name of the organization Native American Rights Fund I	nc			Employer iden	tification number
				84-0611876	
Part I Fundraising Ac	tivities. Comple	te if the organ	nization answered "Yes"	to Form 990, Part IV	, line 17.
1 Indicate whether the orga	nızatıon raısed fund:	through any of	the following activities Ch	eck all that apply	
a 🔽 Mail solicitations			e 🔽 Solicitation of no	n-government grants	
b 🔽 Internet and e-mail s	olicitations		vernment grants		
c Phone solicitations			ng events		
d 🔽 In-person solicitation	ıs			•	
or key employees listed ii b If "Yes," list the ten highe	n Form 990, Part VII est paid individuals o	I) or entity in co or entities (fundr	y individual (including office onnection with professional raisers) pursuant to agreem n 990-EZ filers are not requ	fundraising services? nents under which the fun	
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser ha custody or control of contributions	s?	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
BRICKMILL MARKETING	DIRECT MAIL	No	835,862	120,000	715,862
SERVICES	+	+ +		· · ·	·
		++-			
	+	+ + -		 	
Total		>	835,862	120,000	715,862
licensing			sed to solicit funds or has b		
All States					

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	
2	1 Gross receipts				
:	2 Less Charitable contributions				
3	3 Gross income (line 1 minus line 2)				
۱,	4 Cash prizes				
	5 Non-cash prizes				
,	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses .				
1	10 Direct expense summary Add lin	es 4 through 9 in colum	n (d)	🛌	(
1	11 Net income summary Combine li	nes 3 and 10 in column	(d)	•	
rt	IIII Gaming. Complete if the oi	rganızatıon answered	"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
	\$15,000 on Form 990-EZ, lii	ne 6a.	, , , , , , , , , , , , , , , , , , ,		
	\$15,000 on Form 990-EZ, lii	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	\$15,000 on Form 990-EZ, lii Gross revenue			(c) Other gaming	(Add col (a) through
				(c) Other gaming	(Add col (a) through
	1 Gross revenue			(c) Other gaming	(Add col (a) through
	1 Gross revenue			(c) Other gaming	(Add col (a) through
	1 Gross revenue			(c) Other gaming	(Add col (a) through
	1 Gross revenue 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs	(a) Bingo			(Add col (a) through
	1 Gross revenue 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses	(a) Bingo ☐ Yes ☐ No	□ Yes	Г Yes	(Add col (a) through
	1 Gross revenue	(a) Bingo Yes No s 2 through 5 in column	T Yes	Г Yes Г No	(Add col (a) throug col (c))
	1 Gross revenue 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add line 8 Net gaming income summary Com	(a) Bingo Yes No S 2 through 5 in column bine lines 1 and 7 in col	T Yes No (d)	Г Yes Г No	(Add col (a) throug col (c))
	1 Gross revenue	(a) Bingo Yes No s 2 through 5 in column bine lines 1 and 7 in column ation operates gaming ac	Tyes No (d)	Г Yes	(Add col (a) through col (c))
	1 Gross revenue	(a) Bingo Yes No s 2 through 5 in column bine lines 1 and 7 in column ation operates gaming ac gaming activities in eac	T Yes No (d)	Г Yes Г No	(Add col (a) through col (c))

Director/officer Employee Independent contractor

17 Mandatory distributions

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

Part IV Complete this part to provide additional information for responses to quuestion on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
SCHEDULE G, PART I	FUNDRAISING	PAYMENTS FOR PRODUCTION EXPENSES (SUCH AS PRINTING AND POSTAGE) TO BRICKMILL MARKETING SERVICES WERE MADE SEPARETALY FROM FUNDRAISING FEES TOTAL PRODUCTION EXPENSES AMOUNTED TO \$403,641 FOR THE YEAR

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

Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

DLN: 93493036009493

Employer identification number

OMB No 1545-0047

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

Inspection

Schedule I (Form 990) 2011

Native American Rights Fund Inc						' '	
						84-0611876	
Part I General Information	on on Grants and	l Assistance					
 Does the organization maintain the selection criteria used to av Describe in Part IV the organiz 	ward the grants or as	sıstance? 					✓ Yes 厂
Part II Grants and Other A Form 990, Part IV, lin Part IV and Schedule	ne 21 for any recip	ient that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 5 3 Enter total number of other organization.	,					_	24

Cat No 50055P

MONITORING THE USE OF GRANT FUNDS

(a)Type of grant or assistance

(b) Number of

recipients

(f)Description of non-cash assistance

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

(d)A mount of

non-cash assistance

(e)Method of valuation

(book,

OFFICE OF JUSTICE PROGRAMS FOR TRIBAL CIVIL AND CRIMINAL LEGAL ASSISTANCE GRANTS MONITORING

INCLUDES THOROUGH REVIEW OF PERFORMANCE AND EXPENDITURES SUBJECT TO STRICT TERMS,

(c)A mount of

cash grant

PERIODIC SITE VISITS

	·			FMV, appraisal, other)	
Part IV Supplemental In	formation. Complete this	part to provide the info	rmation required in Par	t I, line 2, and any other a	addıtıonal ınformatıon.
Identifier Return R	eference E	xplanation			
PROCEDURES FOR SCHEDU	LE I, PART I, LINE 2 OI	RGANIZATIONS ARE SUBC	CONTRACTORS RELATED	TO THE FUNDING FROM TH	HE DEPARTMENT OF JUSTICE,

Software ID: Software Version:

EIN: 84-0611876

Name: Native American Rights Fund Inc

(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 SERVICES1016 W 6TH AVE ANCHORAGE, AK 99501	92- 0034754	501(C)(3)	22,618				
ANISHINABE LEGAL SERVICESPO BOX 157 CASS LAKE, MN 56633	41- 0960032	501(C)(3)	79,624				

	_,, ·						
(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 SERVICES609 S ESCONDIDO BLVD ESCONDIDO,CA 86515	94- 1676390	I 501(C)(3)	101,519				
COLORADO LEGAL SERVICES INC 1474 MAIN AVE STE 200 DURANGO,CO 81301	84- 0402702	501(C)(3)	33,705				

(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)	111,212				
DNA PEOPLE'S LEGAL SERVICES PO BOX 306 WINDOW ROCK, AZ 86515	86- 0207220	501(C)(3)	137,430				

(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 INC310 N 5TH ST BOISE,ID 83702	82- 0293641	501(C)(3)	37,324				
LEGAL AID OF WYOMING211 W 19TH ST STE 300 CHEYENNE, WY 82001	83- 0222545	501(C)(3)	45,280				

-							
(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 ASSISTANCE OF NORTH DAKOTAPO BOX 1893 BISMARCK,ND 58502	45- 0336235	501(C)(3)	57,900				
MICHIGAN INDIAN LEGAL SERVICES 814 S GARFIELD AVE TRAVERSE CITY, MI	38- 2077208	501(C)(3)	75,349				

(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 DEFENSEPO BOX 6255 CHOCTAW, MS 39350	64- 0345731	GOV'T ORG	56,554				
MONTANA LEGAL SERVICES616 HELENA AVE STE 100 HELENA MT 59601	81- 0298262	501(C)(3)	64,214				

(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
NATIVE HAWAIIAN LEGAL SERVICES1164 BISHOP STREET HONOLULU, HI 96813	99- 0161861	501(C)(3)	5,907				
NEBRASKA LEGAL SERVICES1904 FARNAM ST STE 500 OMAHA.NE 68102	47- 0483506	501(C)(3)	31,098				

(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 SERVICES530 S 6TH ST LAS VEGAS,NV 89101	88- 0176914	501(C)(3)	54,687				
NEW MEXICO LEGAL AIDPO BOX 25486 ADMIN ALBUQUERQUE,NM 87125	85- 0116950	501(C)(3)	19,619				

(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,	(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)	23,334		other)		
OKLAHOMA INDIAN LEGAL SERVICES4200 PERIMETER CTR OKLAHOMA CITY,	73- 1142462	501(C)(3)	79,693				

(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 PROGRAM1827 NE 44TH AVE PORTLAND, OR 87213	83- 0635480	1 5017(**)(3)	18,353				
PINE TREE LEGAL ASSISTANCEPO BOX 547 PORTLAND, ME 04112	01- 0279387	501(C)(3)	58,439				

(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 AID2343 E BRADWAY BLVD TUCSON, AZ 85719	86- 0143449	501(C)(3)	64,906				
TEXAS RIOGRANDE LEGAL AID300 S TEXAS BLVD WESLACO,TX 78596	74- 1675230	501(C)(3)	43,127				

(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 SERVICES205 NORTH 400 WEST SALT LAKE CITY, UT 84103	87- 0298910	501(0)(3)	75,422				
WISCONSIN JUDICAREINDIAN LAW OFFICEPO BOX 6100 WAUSAU.WI 54402	39- 1170880	501(C)(3)	31,339				

DLN: 93493036009493

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Native American Rights Fund Inc		Employer identif	ication nun	nber	
-		84-0611876			
Part I Questions Regarding	Compensation				

		•		res	NO
1a	Check the appropriate box(es) if the organization provided any of the foll 990, Part VII, Section A, line 1a Complete Part III to provide any rele				
	First-class or charter travel Housing all	owance or residence for personal use			
	Travel for companions Payments	or business use of personal residence			
	Tax idemnification and gross-up payments Health or s	ocıal club dues or ınıtıatıon fees			
	Discretionary spending account Personal se	ervices (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?				
3	Indicate which, if any, of the following the organization uses to establish organization's CEO/Executive Director Check all that apply				
	·	ployment contract			
		cion survey or study			
	Form 990 of other organizations Approval b	y the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, or a related organization	line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable	amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-	9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization contingent on the revenues of	inization pay or accrue any			
а	The organization?				Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of				
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III				No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?				
					

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

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

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

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and		(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	(ii) Bonus & (iii) Other reportable	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) JOHN ECHOHAWK	(ı) (ıı)	180,726	0	1,031	5,736	26,658	8 214,151	1
(2) MELODY MCCOY	(ı) (ıı)	145,610	0	407	4,680	31,185	5 181,882	2
(3) KIM GOTTSCHALK	(ı) (ıı)	152,865	0	1,031	4,848	24,864	4 183,608	В
(4) DON WHARTON	(ı) (ıı)	155,866	0	1,031	4,728	11,523	3 173,148	В
(5) STEVEN MOORE	(ı) (ıı)	150,530	0	527	4,728	28,273	3 184,058	В
(6) HEATHER KENDALL	(ı) (ıı)	148,631	. 0	527	4,104	17,769	9 171,031	1
(7) RICHARD GUEST	(I) (II)	134,611	. 0	407	3,840	14,348	8 153,206	5
		<u> </u>			<u></u> /			
	'	 '	<u> </u>	<u> </u>	+	 	<u> </u>	
	+		<u> </u>	 	 		<u>'</u>	
	+							
	'	<u> </u>	<u> </u>	<u> </u>	<u> </u>	1		<u> </u>
	'	'	1'	1'	1	1		

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

Identifier	Return Reference	Explanation

Schedule J (Form 990) 2011

OMB No 1545-0047

2011

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.

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

84-0611876

ldentifier	Return Reference	Explanation
PROCESS TO REVIEW THE FORM 990	FORM 990, PART VI, QUESTION 11B	THE FORM 990 IS PREPARED BY THIRD PARTY PREPARERS THE CHIEF FINANCIAL OFFICER THOROUGHLY REVIEWS THE FORM 990 AND THE BOARD OF DIRECTORS ARE PROVIDED WITH COPIES OF THE FORM 990 PRIOR TO FILING WITH THE IRS
PROCESS FOR MONITORING COMPLIANCE WITH CONFLICT OF INTEREST POLICY	FORM 990, PART VI, QUESTION 12C	BOARD OF DIRECTORS, OFFICERS, SUPERVISORS, AND OTHER PROFESSIONAL STAFF ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY (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 BOARD 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 (ED) (IF ED HAS A PCI, THEN TO THE BOARD CHAIR) THE MATTER WILL THEN GO TO CORPORATE OFFICERS 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 POSITIONS IN THE SUMMER OF EVERY EVEN YEAR IN WHICH CURRENT SALARIES ARE COMPARED TO MARKET SURVEY 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 DISCUSSED 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 2012
EXPLAIN IF 1023/1024, 990, 990-T 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	PART VIII, LINE 1(E)	THE AMOUNT SHOWN AS GOVERNMENT GRANTS ON LINE 1(E) INCLUDES \$12,252,706 OF GRANT REVENUE FROM APPROXIMATELY 39 TRIBAL GOVERNMENTS
OTHER CHANGES IN NET ASSETS	FORM 990, PART XI, LINE 5	UNREALIZED GAIN 626,019

Additional Data

Software ID: Software Version:

EIN: 84-0611876

Name: Native American Rights Fund Inc

Form 990, Special Condition Description:

Special Condition Description