

Part II Signature Block																
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge																
Sign Here	<div>*****</div> <div>Signature of officer</div> <div>2020-09-02</div> <div>Date</div>															
	<div>JAMES M RINEFIERD TREASURER</div> <div>Type or print name and title</div>															
Paid Preparer Use Only	<table border="1"> <tr> <td>Print/Type preparer's name</td> <td>Preparer's signature</td> <td>Date 2020-09-02</td> <td>Check <input type="checkbox"/> if self-employed</td> <td>PTIN P01365820</td> </tr> <tr> <td colspan="3">Firm's name ▶ MARCUM LLP</td> <td colspan="2">Firm's EIN ▶ 11-1986323</td> </tr> <tr> <td colspan="3">Firm's address ▶ 1899 L STREET NW SUITE 850 WASHINGTON, DC 20036</td> <td colspan="2">Phone no (202) 227-4000</td> </tr> </table>	Print/Type preparer's name	Preparer's signature	Date 2020-09-02	Check <input type="checkbox"/> if self-employed	PTIN P01365820	Firm's name ▶ MARCUM LLP			Firm's EIN ▶ 11-1986323		Firm's address ▶ 1899 L STREET NW SUITE 850 WASHINGTON, DC 20036			Phone no (202) 227-4000	
	Print/Type preparer's name	Preparer's signature	Date 2020-09-02	Check <input type="checkbox"/> if self-employed	PTIN P01365820											
	Firm's name ▶ MARCUM LLP			Firm's EIN ▶ 11-1986323												
Firm's address ▶ 1899 L STREET NW SUITE 850 WASHINGTON, DC 20036			Phone no (202) 227-4000													

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

THE HUMAN RIGHTS CAMPAIGN IS ORGANIZED AND OPERATED FOR THE PROMOTION OF THE SOCIAL WELFARE OF THE LESBIAN, GAY, BISEXUAL, TRANSGENDER AND QUEER COMMUNITY BY INSPIRING AND ENGAGING INDIVIDUALS AND COMMUNITIES, HRC STRIVES TO END DISCRIMINATION AGAINST LGBTQ PEOPLE AND REALIZE A WORLD THAT ACHIEVES FUNDAMENTAL FAIRNESS AND EQUALITY FOR ALL

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code) (Expenses \$	10,700,450	including grants of \$	130,178) (Revenue \$)
See Additional Data					

4b	(Code) (Expenses \$	10,169,847	including grants of \$	74,275) (Revenue \$	1,211,915)
See Additional Data					




















4c	(Code) (Expenses \$	4,393,856	including grants of \$	7,984) (Revenue \$)
See Additional Data					

	(Code) (Expenses \$	4,884,437	including grants of \$	207,868) (Revenue \$)
OTHER PROGRAMS					

4d	Other program services (Describe in Schedule O)				
	(Expenses \$	4,884,437	including grants of \$	207,868) (Revenue \$)

4e	Total program service expenses ▶	30,148,590			
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Part 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	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3 Yes	
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	
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 Yes	
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	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 	21 Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? 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)			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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	Yes	
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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	183	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 314			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b	Yes	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		No
b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a	Yes	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	Yes	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N		15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O		16		No

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	24	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent	24	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a Yes	
b	Each committee with authority to act on behalf of the governing body?	8b Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
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 purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c Yes	
13	Did the organization have a written whistleblower policy?	13 Yes	
14	Did the organization have a written document retention and destruction policy?	14 Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a Yes	
b	Other officers or key employees of the organization	15b Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
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▶

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.

☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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 during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

▶JAMES M RINEFIRED 1640 RHODE ISLAND AVENUE NW WASHINGTON, DC 20036 (202) 216-1500

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

Check if Schedule O contains a response or note to any line in this Part VII ☐

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

See instructions for the order in which to list the persons above

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

[illegible]

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	4,731,820	0	516,002

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 91

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
LAUTMAN MASKA NEILL & COMPANY 1730 RHODE ISLAND AVE NW 301 WASHINGTON, DC 20036	DIRECT MAIL/MEMBERSHIP OUTREACH	1,909,084
FUND FOR THE PUBLIC INTEREST INC 294 WASHINGTON STREET 500 BOSTON, MA 02108	PUBLIC EDUCATION AND CANVASSING	1,844,894
HARGROVE INC ONE HARGROVE DRIVE LANHAM, MD 20706	EVENTS PRODUCTION	591,922
DIGITAL MEDIA SOLUTIONS LLC 4800 140TH AVENUE NORTH 101 CLEARWATER, FL 33762	MEMBER ACQUISITION	512,255
DONOR SEVICES GROUP 1200 WILSHIRE BOULEVARD 650 LOS ANGELES, CA 90017	MEMBER ACQUISITION	442,739

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 37

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	616					
	b Membership dues	1b						
	c Fundraising events	1c	1,976,870					
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above	1f	35,069,082					
	g Noncash contributions included in lines 1a - 1f \$	1g	93,493					
	h Total. Add lines 1a-1f ▶			37,046,568				
Program Service Revenue			Business Code					
	2a ADVERTISING		541800	72,500		72,500		
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f. ▶			72,500				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			161,625		161,625		
	4 Income from investment of tax-exempt bond proceeds ▶							
	5 Royalties ▶			529,517		529,517		
	6a Gross rents	(i) Real	(ii) Personal					
		6a	943,767					
		b Less rental expenses	6b					0
		c Rental income or (loss)	6c					943,767
	d Net rental income or (loss) ▶			943,767		943,767		
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		7a	53,822					
		b Less cost or other basis and sales expenses	7b					54,253
		c Gain or (loss)	7c					-431
	d Net gain or (loss) ▶			-431		-431		
	8a Gross income from fundraising events (not including \$ 1,976,870 of contributions reported on line 1c) See Part IV, line 18							
		8a	7,860,510					
		b Less direct expenses	8b					3,221,858
	c Net income or (loss) from fundraising events ▶			4,638,652		4,638,652		
	9a Gross income from gaming activities See Part IV, line 19							
		9a						
		b Less direct expenses	9b					
	c Net income or (loss) from gaming activities ▶							
	10a Gross sales of inventory, less returns and allowances							
10a		1,651,439						
b Less cost of goods sold		10b	439,524					
c Net income or (loss) from sales of inventory ▶			1,211,915	1,211,915				
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d All other revenue								
e Total. Add lines 11a-11d ▶								
12 Total revenue. See instructions ▶			44,604,113	1,211,915	72,500	6,273,130		

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).

Check if Schedule O contains a response or note to any line in this Part IX. ☒

Do not include amounts reported on lines 6b, 7b, 8b, 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 domestic organizations and domestic governments. See Part IV, line 21.	233,852	233,852		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	186,453	186,453		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	2,757,967	1,136,968	1,402,212	218,787
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	12,389,212	8,534,683	2,769,251	1,085,278
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	621,744	422,627	143,564	55,553
9 Other employee benefits.	945,115	635,546	222,193	87,376
10 Payroll taxes.	1,950,426	1,252,105	529,466	168,855
11 Fees for services (non-employees):				
a Management.				
b Legal.	24,622	1,770	22,852	
c Accounting.	55,323		55,323	
d Lobbying.	520,557	520,557		
e Professional fundraising services. See Part IV, line 17.	675,062			675,062
f Investment management fees.	784		784	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	6,012,765	4,918,603	429,958	664,204
12 Advertising and promotion.	162,836	162,827		9
13 Office expenses.	6,006,159	3,281,840	1,074,791	1,649,528
14 Information technology.				
15 Royalties.				
16 Occupancy.	1,811,848	1,206,839	412,316	192,693
17 Travel.	1,910,248	1,524,920	197,251	188,077
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	4,364,134	3,864,627	168,576	330,931
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	369,707	228,075	96,358	45,274
23 Insurance.	230,989	20,822	210,167	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a PREMIUMS DEVELOPMENT	1,217,841	936,150	101,383	180,308
b DIRECT RESPONSE	1,192,557	1,079,326	113,231	
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	43,640,201	30,148,590	7,949,676	5,541,935
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720).	9,055,436	5,280,620	354,823	3,419,993

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1,550,747	1	724,235
	2	Savings and temporary cash investments		503,721	2	508,296
	3	Pledges and grants receivable, net		19,225	3	36,000
	4	Accounts receivable, net		2,317,845	4	1,757,486
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		192,268	8	174,017
	9	Prepaid expenses and deferred charges		1,037,886	9	738,615
	10a	Land, buildings, and equipment—cost or other basis—Complete Part VI of Schedule D	10a	6,344,194		
	b	Less—accumulated depreciation	10b	4,896,704		
				1,087,589	10c	1,447,490
	11	Investments—publicly traded securities		7,691,379	11	8,839,217
	12	Investments—other securities—See Part IV, line 11			12	
	13	Investments—program-related—See Part IV, line 11			13	
	14	Intangible assets			14	
15	Other assets—See Part IV, line 11		4,875,983	15	5,536,826	
16	Total assets. Add lines 1 through 15 (must equal line 34)		19,276,643	16	19,762,182	
Liabilities	17	Accounts payable and accrued expenses		5,243,844	17	4,747,112
	18	Grants payable			18	
	19	Deferred revenue		813,891	19	831,857
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability—Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24)—Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		6,057,735	26	5,578,969
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions		10,963,674	27	12,433,398
	28	Net assets with donor restrictions		2,255,234	28	1,749,815
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		13,218,908	32	14,183,213
33	Total liabilities and net assets/fund balances		19,276,643	33	19,762,182	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	44,604,113
2	Total expenses (must equal Part IX, column (A), line 25)	2	43,640,201
3	Revenue less expenses Subtract line 2 from line 1	3	963,912
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,218,908
5	Net unrealized gains (losses) on investments	5	393
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	14,183,213

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

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

Additional Data

Software ID:
Software Version:
EIN: 52-1243457
Name: HUMAN RIGHTS CAMPAIGN INC

Form 990 (2019)

Form 990, Part III, Line 4a:

FEDERAL, FIELD AND LEGAL ADVOCACY AT THE FEDERAL LEVEL, HRC ADVOCATES FOR POLICIES, REGULATORY CHANGES AND LEGISLATION THAT GUARANTEE THE LEGAL EQUALITY OF LESBIAN, GAY, BISEXUAL, TRANSGENDER AND QUEER (LGBTQ) PEOPLE AFTER MORE THAN FIVE YEARS OF WORK--INCLUDING HELPING TO DRAFT THE INITIAL LEGISLATION, BUILDING BIPARTISAN SUPPORT, DRIVING COALITION AND BUSINESS SUPPORT, SHAPING THE PUBLIC NARRATIVE AND STRATEGIZING TO ENSURE THE BILL WAS A PRIORITY--THE HOUSE OF REPRESENTATIVES PASSED THE EQUALITY ACT, WHICH WOULD UPDATE OUR NATION'S CIVIL RIGHTS LAWS TO EXPLICITLY PROTECT LGBTQ PEOPLE FROM DISCRIMINATION IN STATES AND MUNICIPALITIES, HRC TRACKED MORE THAN 800 POTENTIALLY LGBTQ-RELATED BILLS, INCLUDING MORE THAN 300 PRO-EQUALITY BILLS AND MORE THAN 100 ANTI-EQUALITY BILLS, IN PARTICULAR, HRC ENGAGED IN EFFORTS TO STOP HIGH-PROFILE ANTI-LGBTQ LEGISLATION IN TENNESSEE, IDAHO, SOUTH DAKOTA, AND IOWA, WHILE LEADING EFFORTS TO PASS THE VIRGINIA VALUES ACT AS PART OF THESE EFFORTS, HRC CONTRIBUTED FINANCIAL AND STAFF RESOURCES TO SUCCESSFUL LEGISLATIVE CAMPAIGNS IN STATES ACROSS THE COUNTRY THROUGHOUT THE 2020 DEMOCRATIC PRESIDENTIAL NOMINATING CONTEST, HRC ENGAGED OUR MEMBERS AND EQUALITY VOTERS IN PRIMARIES AND CAUCUSES WHILE RAISING VISIBILITY ABOUT LGBTQ ISSUES AND LAYING THE GROUNDWORK FOR THE GENERAL ELECTION HRC WILL CONTINUE TO MOBILIZE VOTERS TO ENSURE A PRO-EQUALITY VICTORY IN NOVEMBER

Form 990, Part III, Line 4b:

MEMBERSHIP EDUCATION AND MOBILIZATION HRC HAS GROWN TO MORE THAN 3,000,000 MEMBERS AND SUPPORTERS MEMBERSHIP EDUCATION AND MOBILIZATION CONSISTS OF INFORMING MEMBERS ABOUT LEGISLATIVE ISSUES AS WELL AS CURRENT EVENTS AND OTHER ISSUES THAT IMPACT THE LGBTQ COMMUNITY UTILIZING CUTTING-EDGE TECHNOLOGY AND SOCIAL MEDIA HRC'S FOLLOWERS ON FACEBOOK AND INSTAGRAM CONTINUE TO SURGE NOW TOTALING OVER 2,500,000 AND 700,000 RESPECTIVELY HRC OPERATES ACTION CENTERS IN PROVINCETOWN, MA AND SAN FRANCISCO, CA

Form 990, Part III, Line 4c:

COMMUNICATIONS & MEDIA ADVOCACY HRC WORKS TO BUILD UNDERSTANDING AND AWARENESS OF THE LGBTQ COMMUNITY BY TELLING OUR STORIES TO THE AMERICAN PUBLIC THROUGH THE MAINSTREAM PRESS HRC ALSO MAINTAINS A PRESENCE IN THE LGBTQ MEDIA TO HELP EDUCATE, INFORM, AND ENGAGE OUR COMMUNITY HRC WORKED TO SHARE OUR STORIES THROUGH OUR WEBSITE WWW.HRC.ORG, OUR PUBLICATIONS, INCLUDING EQUALITY MAGAZINE, AND A VARIETY OF ONLINE OUTLETS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHAD GRIFFIN PRESIDENT - UNTIL 08/2019	37 50			X				570,446	0	18,771
CATHY NELSON ASST VICE PRESIDENT - UNTIL 11/2019	37 50			X				317,077	0	32,582
JONI MADISON VICE PRESIDENT	37 50			X				305,224	0	24,750
JAMES M RINEFIERD TREASURER	37 50			X				287,171	0	33,256
SUSANNE SALKIND VP HR & LEADERSHIP DEVELOPMENT	37 50					X		248,227	0	40,462
NICOLE GREENIDGE-HOSKINS SECRETARY	37 50			X				251,227	0	36,822
CHRISTOPHER SPERON ASST VICE PRESIDENT - AS OF 06/2019	37 50			X				263,583	0	24,428
JODEE WINTERHOF SVP, POLICY & POLITICAL AFFAIRS	37 50				X			251,599	0	32,412
JAY BROWN SVP, PROGRAMS, TEACHING & TRAINING	37 50				X			238,503	0	36,067
MARTY ROUSE NATIONAL FIELD DIRECTOR	37 50					X		228,365	0	24,722

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANN CROWLEY VP MEMBERSHIP& ONLINE STRATEGY	37 50				X			220,280	0	21,115
ALPHONSO DAVIDPRESIDENT - AS OF 08/2019	37 50			X				229,332	0	7,016
SARAH WARBELOWLEGAL DIRECTOR	37 50					X		189,908	0	34,981
NICOLE COZIERSVP, DIVERSITY, EQUITY & INCLUSION	37 50				X			214,168	0	10,524
CHRISTOPHER SGRO - ACTING SVPCOMM & MARKETING - UNTIL 02/2020	37 50				X			194,095	0	27,550
ELLEN KAHNSR DIRECTOR, PROGRAMS & PARTNERSHIPS	37 50					X		184,735	0	35,600
TIM BAHRDIR, MAJOR GIFTS & FOUND GIVING	37 50					X		199,776	0	19,457
OLIVIA ALAIR DALTON - SVPCOMM & MARKETING - UNTIL 07/2019	37 50				X			154,251	0	20,614
MOLLY MEEGAN DEPUTYASST SECRETARY - AS OF 04/2019	37 50			X				128,885	0	31,739
DARRIN HURWITZASST SECRETARY - UNTIL 04/2019	37 50			X				54,968	0	3,134

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MORGAN COX CHAIR	6 25	X						0	0	0
JOHN RUFFIER IMMEDIATE PAST CHAIR	3 75	X						0	0	0
VANESSA BENAVIDES VICE CHAIR - UNTIL 09/2019	6 25	X						0	0	0
IAN BARRETT DIRECTOR - UNTIL 09/2019	2 50	X						0	0	0
LIZ BASKIN DIRECTOR	3 75	X						0	0	0
BRUCE BASTIAN DIRECTOR	2 50	X						0	0	0
CHRIS BOONE DIRECTOR	3 75	X						0	0	0
PAUL BOSKIND DIRECTOR	2 50	X						0	0	0
GEORGE CHEEKS DIRECTOR	2 50	X						0	0	0
TIM DOWNING DIRECTOR - UNTIL 09/2019	6 25	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PATTY ELLIS DIRECTOR	3 75	X						0	0	0
MELANIE FALLS DIRECTOR	2 50	X						0	0	0
ANNE FAY DIRECTOR	3 75	X						0	0	0
MATT GARRETT DIRECTOR	3 75	X						0	0	0
JODY GATES DIRECTOR - UNTIL 03/2020	6 25	X						0	0	0
SUZANNE HAMILTON DIRECTOR - UNTIL 09/2019	2 50	X						0	0	0
JAMES HARRISON DIRECTOR - UNTIL 03/2020	2 50	X						0	0	0
CHRIS LABONTE DIRECTOR	6 25	X						0	0	0
DAVID LAHTI DIRECTOR - UNTIL 09/2019	2 50	X						0	0	0
JUSTIN MIKITA DIRECTOR	3 75	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DYSHAUN MUHAMMAD DIRECTOR - UNTIL 09/2019	3 75	X						0	0	0
ROB NEWHART DIRECTOR - UNTIL 09/2019	2 50	X						0	0	0
LESTER PERRYMAN DIRECTOR	3 75	X						0	0	0
DENSIL PORTEOUS DIRECTOR	2 50	X						0	0	0
HENRY ROBIN DIRECTOR	2 50	X						0	0	0
CHERYL ROSE DIRECTOR - UNTIL 09/2019	2 50	X						0	0	0
PATRICK SCARBOROUGH DIRECTOR	3 75	X						0	0	0
ELIZABETH SCHLESINGER DIRECTOR	6 25	X						0	0	0
SHELLY SCHOENFELD DIRECTOR - UNTIL 09/2019	2 50	X						0	0	0
SAM SLATE DIRECTOR	2 50	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAN SLATER DIRECTOR	2 50	X						0	0	0
BEN WALDMAN DIRECTOR	3 75	X						0	0	0
JAMAUL WEBSTER DIRECTOR	3 75	X						0	0	0
MICHAEL WEINHOLTZ DIRECTOR	2 50	X						0	0	0
DEBBIE WERNET DIRECTOR - UNTIL 09/2019	2 50	X						0	0	0
TINA WHITE DIRECTOR	3 75	X						0	0	0

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.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

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

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

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

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

Name of the organization HUMAN RIGHTS CAMPAIGN INC	Employer identification number 52-1243457
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")	
2	Political campaign activity expenditures (see instructions)	▶ \$ 417,762
3	Volunteer hours for political campaign activities (see instructions)	6,256

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

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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?		<input type="checkbox"/> Yes <input type="checkbox"/> 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	▶ \$	15,000
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$	15,000
4	Did the filing organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	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		

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION INC	1401 H STREET NW SUITE 450 WASHINGTON, DC 20005	13-4220019	15,000	
2				
3				
4				
5				
6				

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

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

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated group
totals

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

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

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a. If zero or less, enter -0-
- i** Subtract line 1f from line 1c. If zero or less, enter -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 separate instructions for lines 2a through 2f.)****Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
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			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add 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?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	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

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART I-A, LINE 1	HRC COMMUNICATED WITH ITS MEMBERSHIP ABOUT FEDERAL AND STATE ELECTIONS IN 2019 IN ORDER TO SUPPORT FAIR-MINDED CANDIDATES HRC PAID ADMINISTRATIVE AND FUNDRAISING EXPENSES OF THE HRC PAC

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DLN: 93493246016060

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization
HUMAN RIGHTS CAMPAIGN INC

Employer identification number
52-1243457

Part I

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

1

Total number at end of year

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

(a)

Donor advised funds

(b)

Funds and other accounts

5

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

☐

Yes

☐

No

6

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

☐

Yes

☐

No

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

2a

Total number of conservation easements

2b

Total acreage restricted by conservation easements

2c

Number of conservation easements on a certified historic structure included in (a)

2d

Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

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

☐

Yes

☐

No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐

Yes

☐

No

9

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenue included on Form 990, Part VIII, line 1

► \$

(ii)

Assets included in Form 990, Part X

► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2019

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		840,183	612,176	228,007
d Equipment		5,260,193	4,053,030	1,207,163
e Other		243,818	231,498	12,320
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				1,447,490

Part VII

Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) DEPOSITS	48,685
(2) DUE FROM HRC FOUNDATION	5,378,357
(3) ACCRUED INTEREST	37,418
(4) BENEFICIAL INTERESTS IN TRUSTS	72,366
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	5,536,826

Part X

Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	50,486,701
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	393
b	Donated services and use of facilities	2b	255,587
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	5,627,392
e	Add lines 2a through 2d	2e	5,883,372
3	Subtract line 2e from line 1	3	44,603,329
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	784
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	784
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	44,604,113

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	48,287,521
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	255,587
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	4,392,517
e	Add lines 2a through 2d	2e	4,648,104
3	Subtract line 2e from line 1	3	43,639,417
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	784
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	784
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	43,640,201

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-1243457
Name: HUMAN RIGHTS CAMPAIGN INC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	HRC PERFORMED AN EVALUATION OF UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED MARCH 31, 2020, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EVENT EXPENSES 3,221,858 COST OF GOODS SOLD 439,524 REVENUE OF 527 SEGREGATED FUNDS INCLUDED IN THE AUDITED FINANCIAL STATEMENTS AND EXCLUDED ON THE FEDERAL FORM 990 1,966,010

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EVENT EXPENSES 3,221,858 COST OF GOODS SOLD 439,524 EXPENSES OF 527 SEGREGATED FUNDS INCLUDED IN THE AUDITED FINANCIAL STATEMENTS AND EXCLUDED ON THE FEDERAL FORM 990 731,135

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DLN: 93493246016060

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" on 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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047

2019

Open to Public
Inspection

Name of the organization
HUMAN RIGHTS CAMPAIGN INC

Employer identification number
52-1243457

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1

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

a

☒ Mail solicitations

e

☒ Solicitation of non-government grants

b

☒ Internet and email solicitations

f

☐ Solicitation of government grants

c

☒ Phone solicitations

g

☒ Special fundraising events

d

☒ In-person solicitations

2a

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

☒ Yes ☐ No

b

If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
LAUTMAN MASKA NEILL & COMPANY 1730 RHODE ISLAND AVENUE NW WASHINGTON, DC 20036	DIRECT MAIL, EMAIL AND TELEPHONE FUNDRAISING		No	9,557,553	2,186,789	7,370,764
DONOR SERVICES GROUP LLC 6715 SUNSET BOULEVARD LOS ANGELES, CA 90028	TELEPHONE FUNDRAISING		No	4,018,517	427,893	3,590,624
DIGITAL MEDIA SOLUTIONS 4800 140TH AVENUE NORTH SUITE 101 CLEARWATER, FL 33762	DIGITAL ADVERTISING		No	179,060	646,944	-467,884
SKY ADVISORY GROUP 2311 MANDEVILLE CANYON RD LOS ANGELES, CA 90049	FUNDRAISING		No	150,000	24,000	126,000
TELEFUND INC 186 LINCOLN ST SUITE 100 BOSTON, MA 02110	MEMBER ACQUISITION		No	96,860	199,924	-103,064
V2 CONSULTING LLC 525 WEST 28TH ST NEW YORK, NY 10001	FUNDRAISING		No	30,000	19,200	10,800
Total				14,031,990	3,504,750	10,527,240

3

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat No 50083H

Schedule G (Form 990 or 990-EZ) 2019

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1 WASHINGTON DC EVENT (event type)	(b) Event #2 NEW YORK EVENT (event type)	(c) Other events 28 (total number)	(d) Total events (add col (a) through col (c))
	1 Gross receipts	2,206,680	706,371	6,924,329	9,837,380
	2 Less Contributions	313,200	90,720	1,572,950	1,976,870
	3 Gross income (line 1 minus line 2)	1,893,480	615,651	5,351,379	7,860,510
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	500,155	52,273	633,791	1,186,219
	7 Food and beverages	187,503	107,860	635,010	930,373
	8 Entertainment	19,230	3,434	61,219	83,883
	9 Other direct expenses	85,335	30,349	905,699	1,021,383
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				3,221,858
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				4,638,652

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers?	<input type="checkbox"/> Yes <input type="checkbox"/> No						
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> Yes <input type="checkbox"/> No						
13 Indicate the percentage of gaming activity conducted in							
a The organization's facility	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 10%;">13a</td> <td style="width: 70%;"></td> <td style="width: 20%; text-align: right;">%</td> </tr> <tr> <td>13b</td> <td></td> <td style="text-align: right;">%</td> </tr> </table>	13a		%	13b		%
13a		%					
13b		%					
b An outside facility							

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ **Yes** ☐ **No**

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 **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference

Explanation

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
HUMAN RIGHTS CAMPAIGN INC

Employer identification number

52-1243457

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3
- 3 Enter total number of other organizations listed in the line 1 table 6

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) INTERN SCHOLARSHIPS	39	127,250			
(2) VOLUNTEER TRAVEL SUPPORT	80	59,203			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	STAFF ARE IN REGULAR CONTACT WITH ORGANIZATIONS RECEIVING CONTRIBUTIONS OR OTHER ASSISTANCE STAFF PROVIDE STRATEGIC ADVICE TO CONTRIBUTION RECIPIENTS AND WORK WITH THEM BEFORE AND AFTER FINANCIAL SUPPORT IS PROVIDED TO DEVELOP PLANS CONSISTENT WITH HRC'S MISSION IN SUPPORT OF LESBIAN, GAY, BISEXUAL, TRANSGENDER AND QUEER EQUAL RIGHTS THE POLICY IS THAT ALL CONTRIBUTIONS AND RECIPIENTS ARE REVIEWED IN ADVANCE BY GENERAL COUNSEL HRC AWARDS INTERN SCHOLARSHIPS BASED ON PROVEN FINANCIAL NEED AND COMMITMENT TO DIVERSITY AS DEMONSTRATED IN A REQUIRED INTERNSHIP APPLICATION ESSAY THE LEADERS OF THE INTERNSHIP PROGRAM REVIEW AND SELECT THE RECIPIENTS AS PART OF FURTHERING HRC'S MISSION, VOLUNTEER TRAVEL SUPPORT IS PROVIDED TO HRC VOLUNTEERS ON AN AS NEEDED BASIS THROUGH TRAVEL EXPENSE REIMBURSEMENT OR DIRECT PAYMENT OF TRAVEL

Additional Data

Software ID:
Software Version:
EIN: 52-1243457
Name: HUMAN RIGHTS CAMPAIGN INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICA VOTES 1155 CONNECTICUT AVE NW SUITE 600 WASHINGTON, DC 20036	26-4568349	501(C)(4)	55,000				GENERAL PROGRAM SUPPORT
THE LEADERSHIP CONFERENCE ON CIVIL AND HUMAN RIGHTS 1620 L STREET NW SUITE 1100 WASHINGTON, DC 20036	52-0789800	501(C)(4)	31,000				GENERAL PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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 NEVADA ASSOCIATION OF PRIDE INC 4001 DECATUR BOULEVARD LAS VEGAS, NV 89103	86-0845653	501(C)(3)	21,189				GENERAL PROGRAM SUPPORT
DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION INC 1401 H STREET NW SUITE 450 WASHINGTON, DC 20005	13-4220019	527	15,000				GENERAL PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPITAL PRIDE ALLIANCE INC 2000 14TH STREET NW SUITE 105 WASHINGTON, DC 20009	26-1763254	501(C)(3)	10,800				GENERAL PROGRAM SUPPORT
FREEDOM OKLAHOMA ACTION FUND 4323 N CLASSEN BOULEVARD OKLAHOMA CITY, OK 73118	26-4497248	501(C)(4)	10,000				GENERAL PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CITY BUSINESS JOURNALS INC DBA WASHINGTON BUSINESS JOURNAL 16770 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693	43-1366184	N/A	10,000				BUSINESS OF PRIDE EVENT SPONSORSHIP
NAACP EMPOWERMENT PROGRAMS INC 4805 MOUNT HOPE DRIVE BALTIMORE, MD 21215	13-1084135	501(C)(3)	10,000				GENERAL PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL GAY & LESBIAN CHAMBER OF COMMERCE 729 15TH STREET NW 9TH FLOOR WASHINGTON, DC 20005	13-4219714	501(C)(6)	7,500				GENERAL PROGRAM SUPPORT

Schedule J (Form 990)	Compensation Information	OMB No 1545-0047
		2019
		Open to Public Inspection
Department of the Treasury Internal Revenue Service	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	
Name of the organization HUMAN RIGHTS CAMPAIGN INC		Employer identification number 52-1243457

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
a Receive a severance payment or change-of-control payment?	4a		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a The organization?	5a		No
b Any related organization?	5b		No
If "Yes," on line 5a or 5b, describe in Part III			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a The organization?	6a		No
b Any related organization?	6b		No
If "Yes," on line 6a or 6b, describe in Part III			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

[illegible]

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	HRC PROVIDED FIRST CLASS AIR TRAVEL ON OCCASION FOR THE PRESIDENT, AS PERMITTED BY POLICY ADOPTED BY THE HRC BOARD. THE PRESIDENT'S SCHEDULE OFTEN REQUIRES LAST MINUTE CHANGES IN TRAVEL PLANS, AND, THEREFORE, FULLY REFUNDABLE TICKETS ARE FREQUENTLY USED. FIRST CLASS TICKETS WERE OCCASIONALLY PURCHASED IN SITUATIONS IN WHICH FULLY REFUNDABLE COACH TICKETS WERE COMPARABLY PRICED TO FIRST CLASS TICKETS. HRCF REIMBURSED HRC FOR ITS ALLOCABLE SHARE OF SUCH AIRFARE. PART II. THE HUMAN RIGHTS CAMPAIGN (HRC) AND HUMAN RIGHTS CAMPAIGN FOUNDATION (HRCF) HAVE ENTERED INTO A COST SHARING ARRANGEMENT UNDER WHICH HRCF REIMBURSES HRC FOR HRCF'S ALLOCABLE SHARE OF THE COMPENSATION OF CERTAIN EMPLOYEES FOR PERFORMING SERVICES PROVIDED TO HRCF. COMPENSATION REIMBURSED BY HRCF IS NOT ADDITIVE TO THE COMPENSATION REPORTED BY HRC. HRC AND HRCF ARE NOT "RELATED ORGANIZATIONS" AS THAT TERM IS DEFINED IN THE FORM 990, GLOSSARY. PURSUANT TO THEIR AGREEMENT, HRCF REIMBURSED HRC FOR ITS SHARE OF COMPENSATION AS FOLLOWS: CHAD GRIFFIN (OFFICER) \$114,325; JAY BROWN (OFFICER) \$207,208; JONI MADISON (OFFICER) \$100,737; JAMES M. RINEFIERD (OFFICER) \$111,163; NICOLE GREENIDGE-HOSKINS (OFFICER) \$105,044; DARRIN HURWITZ (OFFICER) \$2,142; MOLLY MEEGAN (OFFICER) \$63,340; ALPHONSO DAVID (OFFICER) \$99,774.
PART I, LINE 4B	HRC CONTRIBUTED TO THE FOLLOWING EMPLOYEES' SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLANS IN 2019: 1. CATHY NELSON, ASST. VICE PRESIDENT \$11,500; 2. JODEE WINTERHOF, SVP, POLICY & POLITICAL AFFAIRS \$6,566; 3. ANN CROWLEY, VP MEMBERSHIP & ONLINE STRATEGY \$19,000; 4. SUSANNE SALKIND, VP HR & LEADERSHIP DEVELOPMENT \$2,600; 5. SUSAN PAINE, ANALYTICS & STRATEGY DIRECTOR \$7,800; 6. JONI MADISON, VICE PRESIDENT \$3,184.
PART I, LINE 7	CHAD GRIFFIN, CHRISTOPHER SPERON, ALPHONSO DAVID AND CHRISTOPHER SGRO RECEIVED NON-FIXED BONUSES DURING CALENDAR YEAR 2019.

Additional Data

Software ID:
Software Version:
EIN: 52-1243457
Name: HUMAN RIGHTS CAMPAIGN INC

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 CHAD GRIFFIN PRESIDENT - UNTIL 08/2019	(i)	464,566	100,000	5,880	11,429	7,342	589,217	0
	(ii)	0	0	0	0	0	0	0
1 CATHY NELSON ASST VICE PRESIDENT - UNTIL 11/2019	(i)	307,901	0	9,176	15,400	17,182	349,659	0
	(ii)	0	0	0	0	0	0	0
2 JONI MADISON VICE PRESIDENT	(i)	305,224	0	0	14,455	10,295	329,974	0
	(ii)	0	0	0	0	0	0	0
3 JAMES M RINEFIERD TREASURER	(i)	284,351	0	2,820	15,400	17,856	320,427	0
	(ii)	0	0	0	0	0	0	0
4 SUSANNE SALKIND VP HR & LEADERSHIP DEVELOPMENT	(i)	245,407	0	2,820	14,521	25,941	288,689	0
	(ii)	0	0	0	0	0	0	0
5 NICOLE GREENIDGE-HOSKINS SECRETARY	(i)	246,057	0	5,170	10,795	26,027	288,049	0
	(ii)	0	0	0	0	0	0	0
6 CHRISTOPHER SPERON ASST VICE PRESIDENT - AS OF 06/2019	(i)	253,583	10,000	0	14,773	9,655	288,011	0
	(ii)	0	0	0	0	0	0	0
7 JODEE WINTERHOF SVP, POLICY & POLITICAL AFFAIRS	(i)	248,779	0	2,820	14,334	18,078	284,011	0
	(ii)	0	0	0	0	0	0	0
8 JAY BROWN SVP, PROGRAMS, TEACHING & TRAINING	(i)	236,858	0	1,645	13,232	22,835	274,570	0
	(ii)	0	0	0	0	0	0	0
9 MARTY ROUSE NATIONAL FIELD DIRECTOR	(i)	228,365	0	0	12,426	12,296	253,087	0
	(ii)	0	0	0	0	0	0	0
10 ANN CROWLEY VP MEMBERSHIP & ONLINE STRATEGY	(i)	220,280	0	0	11,603	9,512	241,395	0
	(ii)	0	0	0	0	0	0	0
11 ALPHONSO DAVID PRESIDENT - AS OF 08/2019	(i)	179,332	50,000	0	2,966	4,050	236,348	0
	(ii)	0	0	0	0	0	0	0
12 SARAH WARBELOW LEGAL DIRECTOR	(i)	189,908	0	0	10,857	24,124	224,889	0
	(ii)	0	0	0	0	0	0	0
13 NICOLE COZIER SVP, DIVERSITY, EQUITY & INCLUSION	(i)	212,523	0	1,645	10,451	73	224,692	0
	(ii)	0	0	0	0	0	0	0
14 CHRISTOPHER SGRO - ACTING SVP COMM & MARKETING - UNTIL 02/2020	(i)	175,057	19,038	0	10,035	17,515	221,645	0
	(ii)	0	0	0	0	0	0	0
15 ELLEN KAHN SR DIRECTOR, PROGRAMS & PARTNERSHIPS	(i)	179,735	5,000	0	8,859	26,741	220,335	0
	(ii)	0	0	0	0	0	0	0
16 TIM BAHR DIR, MAJOR GIFTS & FOUND GIVING	(i)	193,776	0	6,000	10,082	9,375	219,233	0
	(ii)	0	0	0	0	0	0	0
17 OLIVIA ALAIR DALTON - SVP COMM & MARKETING - UNTIL 07/2019	(i)	152,841	0	1,410	8,895	11,719	174,865	0
	(ii)	0	0	0	0	0	0	0
18 MOLLY MEEGAN DEPUTY ASST SECRETARY - AS OF 04/2019	(i)	128,885	0	0	6,506	25,233	160,624	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization
HUMAN RIGHTS CAMPAIGN INC

Employer identification number
52-1243457

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	5	54,253	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	11	39,240	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

Yes

No

30a

No

b If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

Yes

31

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

No

32a

No

b If "Yes," describe in Part II

33

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	THIS COLUMN REPRESENTS THE NUMBER OF CONTRIBUTIONS, NOT THE NUMBER OF CONTRIBUTED ITEMS

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization
HUMAN RIGHTS CAMPAIGN INC**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019**Open to Public
Inspection****Employer identification number**

52-1243457

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND WAS REVIEWED BY SENIOR MANAGEMENT THE AUDIT AND FINANCE COMMITTEES REVIEWED THE FORM 990 PUBLIC DISCLOSURE COPY PRIOR TO F ILING THE BOARD WAS INVITED TO REVIEW THE 990 PUBLIC DISCLOSURE COPY BEFORE FILING AND A COPY WAS PROVIDED ELECTRONICALLY TO ALL BOARD MEMBERS BEFORE THE 990 WAS FILED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION ANNUALLY SENDS OUT A CONFLICTS OF INTEREST POLICY TO ITS BOARD MEMBERS, OFFICERS AND KEY EMPLOYEES AND REQUESTS A SIGNED DISCLOSURE FORM FROM EACH COVERED INDIVIDUAL ANY DISCLOSED CONFLICT IS REVIEWED BY THE GENERAL COUNSEL IF A CONFLICT DOES EXIST ON A SPECIFIC ISSUE, MEETING MINUTES REFLECT THE BOARD ACTION TO CLEAR THE CONFLICT, EITHER BY HAVING THE AFFECTED BOARD MEMBER, OFFICER OR KEY EMPLOYEE RECUSE THEMSELVES FROM THE DISCUSSION OR VOTE OR REMOVE THEMSELVES FROM ALL DELIBERATIONS THIS POLICY ALSO APPLIES TO EMPLOYEES ALL DIRECTOR-LEVEL STAFF CERTIFY ANNUALLY THEY HAVE REVIEWED THE POLICY AND HAVE NO POTENTIAL CONFLICTS TO REPORT IF A CONFLICT IS REPORTED, IT IS REVIEWED BY GENERAL COUNSEL WHO RESOLVES THE CONFLICT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	WITHIN THE FISCAL YEAR, THE PRESIDENT'S COMPENSATION WAS REVIEWED BY A COMMITTEE OF INDEPENDENT DIRECTORS AND AN EXTERNAL COMPENSATION CONSULTANT. THE RESULTS WERE PRESENTED TO THE FULL BOARD FOR REVIEW AND APPROVAL. MINUTES ARE KEPT OF SUCH MEETINGS. THE LAST COMPENSATION REVIEW FOR THE TOP MANAGEMENT OFFICIAL TOOK PLACE IN 2019. COMPENSATION FOR SENIOR LEVEL STAFF IS ANALYZED PERIODICALLY BY AN INDEPENDENT CONSULTANT IN CONJUNCTION WITH MANAGEMENT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE HUMAN RIGHTS CAMPAIGN DOES NOT MAKE ITS GOVERNING DOCUMENTS OR CONFLICTS OF INTEREST P OLICY AVAILABLE TO THE PUBLIC THE COMBINED FINANCIAL STATEMENTS OF HUMAN RIGHTS CAMPAIGN AND HUMAN RIGHTS CAMPAIGN FOUNDATION ARE POSTED ON THE WEBSITE WWW HRC ORG

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	OTHER PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 3,557,462 MANAGEMENT AND GENERAL EXPENSES 382,108 FUNDRAISING EXPENSES 664,204 TOTAL EXPENSES 4,603,774 CANVASSING PROGRAM SERVICE EXPENSES 1,302,776 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,302,776 TEMPORARY AGENCIES PROGRAM SERVICE EXPENSES 58,365 MANAGEMENT AND GENERAL EXPENSES 47,850 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 106,215

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A	THE HUMAN RIGHTS CAMPAIGN (HRC) AND HUMAN RIGHTS CAMPAIGN FOUNDATION (HRCF) HAVE ENTERED INTO A COST SHARING ARRANGEMENT UNDER WHICH HRCF REIMBURSES HRC FOR HRCF'S ALLOCABLE SHARE OF THE COMPENSATION OF CERTAIN EMPLOYEES FOR PERFORMING SERVICES PROVIDED TO HRCF. COMPENSATION REIMBURSED BY HRCF IS NOT ADDITIVE TO THE COMPENSATION REPORTED BY HRC. HRC AND HRCF ARE NOT "RELATED ORGANIZATIONS" AS THAT TERM IS DEFINED IN THE FORM 990 GLOSSARY. PURSUANT TO THEIR AGREEMENT, HRCF REIMBURSED HRC FOR ITS SHARE OF COMPENSATION AS FOLLOWS: CHAD GRIFFIN (OFFICER) \$114,325; JAY BROWN (OFFICER) \$207,208; JONI MADISON (OFFICER) \$100,737; JAMES M. RINEFIERD (OFFICER) \$111,163; NICOLE GREENIDGE-HOSKINS (OFFICER) \$105,044; DARRIN HURWITZ (OFFICER) \$2,142; MOLLY MEEGAN (OFFICER) \$63,340; ALPHONSO DAVID (OFFICER) \$99,774.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization
HUMAN RIGHTS CAMPAIGN INC

Employer identification number
52-1243457

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)HRC PAC 1640 RHODE ISLAND AVE NW WASHINGTON, DC 20036 51-0399028	POLITICAL WORK IN STATE AND FEDERAL ELECTIONS	DC	527	N/A	HUMAN RIGHTS CAMPAIGN INC	Yes	
(2)HRC EQUALITY VOTES 1640 RHODE ISLAND AVE NW WASHINGTON, DC 20036 26-1206256	POLITICAL WORK IN STATE AND FEDERAL ELECTIONS	DC	527	N/A	HUMAN RIGHTS CAMPAIGN INC	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	Yes
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)HRC PAC	L	185,589	ALLOCATED COST
(2)HRC PAC	Q	74,374	ACTUAL COST
(3)HRC EQUALITY VOTES	L	174,797	ALLOCATED COST

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

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation