ROBERT C ALARIO CPA PC 34 CEDAR STREET WORCESTER, MA 01609 PHONE 508-755-7575/FAX 508-755-7599

NOVEMBER 7, 2014

CENTER FOR RIGHTS IN ACTION, INC PO BOX 55071, #95005 BOSTON, MA 02205-5071

CENTER FOR RIGHTS IN ACTION, INC:

ENCLOSED IS THE ORGANIZATION'S 2013 EXEMPT ORGANIZATION RETURN.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

FORM 990 RETURN:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THIS COPY INDEFINITELY.

VERY TRULY YOURS,

ROBERT C. ALARIO

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2013, or fiscal year beginning JUL 1 , 2013, and ending JUN 30 ,20 14

Department of the Treasury Internal Revenue Service

Name of exempt organization

▶ Do not send to the IRS. Keep for your records.

▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo Employer identification number

OMB No. 1545-1878

CENTER	FOR	RIGHTS	IN	ACTION,	INC

45-3951426

Name and title of officer

TIFFINIY CHENG

CO-DIRECTOR

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a Form 990 check here LX b Total revenue, if any (Form 990, Part VIII, colum	nn (A), line 12) 1b	625,300.
2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here b Tax based on investment income (Form 990-PF check here	90-PF, Part VI, line 5) 4b	
5a Form 8868 check here ▶ □ b Balance Due (Form 8868, Part I, line 3c or Part	II, line 8c) 5b	

Part II **Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's	DIN:	check	one	hox	only
Ullicei 3	TIIV.	CHECK	ULIE	DUA	UIIIV

X I authorize ROBERT C ALARIO CPA PC	to enter my PIN	45395
ERO firm name		nter five numbers, b do not enter all zeros
as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within t is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also au enter my PIN on the return's disclosure consent screen.		
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 indicated within this return that a copy of the return is being filed with a state agency(ies) regulating cha program, I will enter my PIN on the return's disclosure consent screen.	,	
Officer's signature ▶ Date ▶		
Part III Certification and Authentication		

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

04075010400 do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ► ROBERT C. ALARIO

Date ightharpoonup 11/07/14

ERO Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions. 10-01-13

Form **8879-EO** (2013)

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www irs gov/form990 tax year beginning JUL 1, 2013 and ending JUN 30,

Open to Public

A F	or the	\approx 2013 calendar year, or tax year beginning $$ JUL $$ $$ $$ JUL $$ $$ $$ $$ $$ and end	ding J	ŬN 30, 2014	
B	Check if applicable	C Name of organization		D Employer identific	cation number
Г	Addres	CENTER FOR RIGHTS IN ACTION, INC			
	Name change Initial	Doing Business As			951426
	return Termin ated	PO BOX 55071, #95005	om/suite	E Telephone numbe (413) 367-6255
	Ameno return	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	625,300.
	Application pending	BOSION, MA 02203-30/1		H(a) Is this a group re	eturn
	pendii	F Name and address of principal officer: TTFFTNTY CHENG			? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		empt status: ☐ 501(c)(3) X 501(c)(4) (insert no.) ☐ 4947(a)(1) or ☐	527	·	list. (see instructions)
		te: > WWW.CENTERFORRIGHTSINACTION.ORG		H(c) Group exemptio	
			L Year o	of formation: 2011 N	Natate of legal domicile: MA
Pa	art I	Summary			
ė	1 .	Briefly describe the organization's mission or most significant activities: TO PROI	MOTE	SOCIAL WEL	LFARE
au		WITHIN THE MEANING OF SECTION $501(C)\overline{4}$ OF T			
Activities & Governance	1	Check this box if the organization discontinued its operations or disposed			
ő	1	Number of voting members of the governing body (Part VI, line 1a)			3
∞ ′°		Number of independent voting members of the governing body (Part VI, line 1b)			$\frac{3}{4}$
ţį		Total number of individuals employed in calendar year 2013 (Part V, line 2a)			0
ξĘ		Total number of volunteers (estimate if necessary)			0.
¥		Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34			0.
	- 5	Net unrelated business taxable income norm offin 990-1, line 34		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		427,215.	625,297.
Revenue		Program service revenue (Part VIII, line 2g)		0.	0.
	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		54.	3.
æ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		427,269.	625,300.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Ø		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		224,125.	133,327.
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ф		Total fundraising expenses (Part IX, column (D), line 25)			
Ω		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	🗀	251,667.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		475,792.	333,277.
	19	Revenue less expenses. Subtract line 18 from line 12		-48,523.	292,023.
Net Assets or Fund Balances			Beg	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		188,103.	462,347.
of As	21	Total liabilities (Part X, line 26)		37,663.	19,884.
<u> </u>	22	Net assets or fund balances. Subtract line 21 from line 20		150,440.	442,463.
_	art II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules and			y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	preparer	nas any knowledge.	
۵.		Signature of officer		I Date	
Sig		TIFFINIY CHENG, CO-DIRECTOR		Duto	
Her	е	Type or print name and title			
			ΙD	ate Check	II PTIN
Paid	.	Print/Type preparer's name ROBERT C. ALARIO ROBERT C. ALARIO		1/07/14 if self-employ	
	parer	Firm's name ROBERT C ALARIO CPA PC	<u> </u> +	Firm's EIN	04-3344305
	Only	Firm's address 34 CEDAR STREET		I IIIII 3 LIIV	<u> </u>
-550	Jy	WORCESTER, MA 01609		Phone no 50	8-755-7575
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		11 110110 110.50	X Yes No

DRAFI	,, <u> </u>
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Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROTECT AND EXPAND THE INTERNET'S TRANSFORMATIVE POWER IN PEOPLE'S
	LIVES BY CREATING CIVIC CAMPAIGNS THAT ARE ENGAGING FOR MILLIONS OF
	PEOPLE, INCLUDING WORKING ON LEGISLATION TO PROTECT BASIC RIGHTS AND
	FREEDOMS, AND EMPOWERING PEOPLE TO DEMAND TECHNOLOGY AND POLICIES THAT
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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 X 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 \$ 294,329 • including grants of \$) (Revenue \$)
	TO PROTECT AND EXPAND THE INTERNET'S TRANSFORMATIVE POWER IN PEOPLE'S
	LIVES BY CREATING CIVIC CAMPAIGNS THAT ARE ENGAGING FOR MILLIONS OF
	PEOPLE, INCLUDING WORKING ON LEGISLATION TO PROTECT BASIC RIGHTS AND
	FREEDOMS, AND EMPOWERING PEOPLE TO DEMAND TECHNOLOGY AND POLICIES THAT
	SERVE THEIR INTERESTS.
	
4b	(Code:) (Expenses \$) (Revenue \$)
7.0	(Code) (Expenses #
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
<u>,</u>	Otherwise was a series of (Describe in Oak adds O.)
4d	Other program services (Describe in Schedule O.)
1-	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 294,329.
4e	Total program service expenses ► 294,329. Form 990 (2013)

332002 10-29-13

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(s) or 4947(a)(1) (other than a private foundation)? 1 If "the organization required to complete Schedule B, Schedule of Contributions" 2 Is the organization required in complete Schedule B, Schedule of Contributions on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 3 X X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization associan 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as definition in Serverus Procedure 8-19-17 "Yes," complete Schedule C, Part III 6 Did the organization marktan any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization merciew or hold a conservation easement, including assements to presenve open space, the environment, historic land rease, or historic attributions? If "Yes," complete Schedule D, Part II 8 Did the organization marktan amount in Part X, line 21, for secrory or custodial account liability, serve as a custodian for amounts in such Lutturery? If "Yes," complete Schedule D, Part II 9 Did the organization report an amount in Part X, line 21, for secrory or custodial account liability, serve as a custodian for amounts in such liability and the secretary of the following questions is "Yes," then complete Schedule D, Part V II 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10 ft if yes, complete Schedule D, Part V II 11 Did the organization report an amount for investments - program related in Part X, line 12 ft hat is 5% or more of its total assets reported in Part X, line 16 ft "Yes," complete Schedule D, Part X II 12 Did the organization report an amount for the assets in Part X, line 15 that is 5% or more of its total assets reported in Par				Yes	No
2 Is the organization required to complete Schedule <i>B. Schedule of Continuoron</i> 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 <i>C. Part I</i> 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 <i>C. Part II</i> 5 Is the organization assection 501(c)(4), or 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Neevue Procedule 98-191 if "Yes," complete Schedule <i>C. Part II</i> 5 Is 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 <i>D. Part II</i> 7 Did the organization receive or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic articulars? if "Yes," complete Schedule <i>D. Part III</i> 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? if "Yes," complete Schedule <i>D. Part III</i> 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, proyecite schedule propriets Schedule and accounts in the securities of the securities in Part X, line 10 part X, line 11 part X, line 12 part X, line 12 part X, line 16 part X, line	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Dut 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					_X_
public office? If "Yes," complete Schedule C, Part I 4 Section 501((x)) or ganizations. 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 5 is the organization a section 501(x)(a) 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III 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 II 7 Did the organization receive or hold a conservation easement, including assessments to preserve open space, the environment, historical damesa, or historic cal treature. If "Yes," complete Schedule D, Part II II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II II 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 counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV II 10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-admonsments? If "Yes," complete Schedule D, Part V II 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II 12 Did the organization report an amount for other assets in Part X, line 10? If "Yes," complete Schedule D, Part X II 13 Did the organization report an amount for other assets he Part X, line 10? If "Yes," complete Schedule D, Part X II 14 Did the organization assets Schedule D, Part X II 15 Did the organization assets chedule D, P	2		2	Х	
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 "Ses," complete Schedule C, Part III 5 Is the organization as action 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88.19? If "Yes," complete Schedule C, Part III 7 Did the organization realization arise of hold a conservation essement, including assements to be reserve open pasce, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain and collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 9 Did the organization amount in Part X, line 21, for scrow 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 V 9 Did the organization developed and part II 1985, complete Schedule D, Part V 9 Did the organization asserts or through a related organization, hold assets in temporarily restricted endowments, permanent and endowments, or quasi-indowments) If "Yes," complete Schedule D, Part V 9 Did the organization report an amount for imestments of the securities in Part X, line 12 If If the cyranization services? If If the organization is a part II 1985, complete Schedule D, Part V 9 Did the organization report an amount for investments or program related in Part X, line 15 If "Yes," complete Schedule D, Part X 1 In 11 In 1 In 1 In 1 In 1 In 1 In 1	3		3		Х
5 Is the organization a section 501(c)(4), 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98.192 if "Yes," complete Schedule C, Part III 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 II Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 Did the organization is newer to any of the following questions is "Yes," then complete Schedule D, Part V 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V, II If II the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII II II X III II X III III X III III	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		
similar amounts as defined in Revenue Procedure 98-19/16 "Yes," complete Schedule C, Part III by 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 for which donors have the right to provide advice on the distribution or investment of amounts in such 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 III 7, X X 10 to the organization report an amount in Part X, line 11, its organization report an amount in Part X, line 12, 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 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, premanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part IV 11 If the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part IV 12 Did the organization report an amount for investments - program related in Part X, line 107 If "Yes," complete Schedule D, Part VIII 12 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 167 If "Yes," complete Schedule D, Part VIII 14 Did the organization report an amount for other liabilities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X 11 Did the organization salential and amount for other liabilities in Part X, line 15 If this is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X 11 Did the organization salential and the organization	5				
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 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	3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 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 11 If the organization in report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 12 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 14 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 VII 15 Did the organization in separate, independent audited financial statements for the tax year include a footnote that addresses the organization included in consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 16 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 17 If "Yes," and if the organization answered "No" to line 12s, then completing Schedule D, Part X and XII 28 Did the organization incl	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
Schedule D, Part III 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 V 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 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VIII, VII, VIX 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 VIII b Did the organization report an amount for investments - order related in Part X, line 10? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets 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 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 X 11 If X 12 Did the organization is separate or consolidated financial statements for the tax year include a footnote that addressess the organization's isability for uncertain tax positions under EIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11 If X 12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 12 Did the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X 13 Sthe organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X 14 Did the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X 15		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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Schedule D, Parts XI and XII 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 X 13 Is the organization a school described in section 170(b)(1)A(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 15 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 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 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 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II 18 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X		•	11f		_X_
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	20a				

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Form 990 (2013) CENTER FOR RIGHTS
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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	00		x
04-	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		Α.
24 a	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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Δ.
30	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		х
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		Х
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		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	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		X
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	х	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check 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	13			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming			
	(gambling) winnings to prize winners?			1c	Х	
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	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		_X_
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			37
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country:					
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial			_		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		$\frac{x}{x}$
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction of the live of the live of the superior of the form of the live of the liv			5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions?			6a	х	
h	any contributions that were not tax deductible as charitable contributions?			0a		
	were not tax deductible?	.10113 C	y girts	6b	х	
7	Organizations that may receive deductible contributions under section 170(c).			-		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices p	provided to the payor?	7a		Х
b	TODAY TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE TO			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	uired			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contra	ot?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control			7f		<u> </u>
_	If the organization received a contribution of qualified intellectual property, did the organization file Formation of the organization of the organization file Formation of the organization of the organiza			7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, a			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any un	ie during the year!	8		
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?			9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:			0.0		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			4.5		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ا ممد				
_	organization is licensed to issue qualified health plans	13b 13c				
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?		<u> </u>	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b		
	100, has it mod a 1 offir 120 to report those payments: ii 110, provide an explanation in Outload	- -			990	(2013)

Form 990 (2013)

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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					X			
<u>Sec</u>	tion A. Governing Body and Management								
			1	_	Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		<u> </u>					
	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	1b		3					
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?								
3	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?									
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X			
6	Did the organization have members or stockholders?			6		Х			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoin	t one or						
	more members of the governing body?			7a		Х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockł	olders, or						
	persons other than the governing body?			7b		Х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by t	ne following:						
а	The governing body?			8a	Х				
b	Each committee with authority to act on behalf of the governing body?			8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)						
					Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a		X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapte	rs, 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 boo	ly bef	ore filing the form?	11a	X				
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	X				
b	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y								
	in Schedule O how this was done			12c		Х			
13	Did the organization have a written whistleblower policy?			13		X			
14	Did the organization have a written document retention and destruction policy?			14		X			
15	Did the process for determining compensation of the following persons include a review and approve	al by i	ndependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official			15a	X				
b	Other officers or key employees of the organization			15b	X				
	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 arrange	ment	with a			7.7			
	taxable entity during the year?			16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nizati	on's						
	exempt status with respect to such arrangements?			16b					
	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed NONE								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ı (Sec	tion 501(c)(3)s only)	availab	ole				
	for public inspection. Indicate how you made these available. Check all that apply.		0)						
	Own website X Another's website X Upon request Upon request		•						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict	of interest policy, a	nd finar	ncial				
	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books a	nd re	cords of the organiz	ation:	_				
	TIFFINIY CHENG - (413) 367-6255								
	PO BOX 55071, #95005, BOSTON, MA 02205-5071								

Form 990 (2013) CENTER FOR RIGHTS IN ACTION, INC

45-3951426

Page 7

Part VII 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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization (A)	(B)			(C Pos				(D)	(E)	(F)
Name and Title	Average	(do	not o	Pos	ition	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	neck more than one as person is both an director/trustee)			compensation	compensation	amount of
	week	\vdash	Cer ai	lu a u	recic	Ji / ii us	lee)	from	from related	other
	(list any hours for	lirecto				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or c	stee			nsated		(W-2/1099-MISC)	(** 2/ 1000 141100)	organization
	organizations	trust	nal tru		oyee	om be		,		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
77.	line)	밀	lust	₩	Ş.	Hig	Pg			
(1) MATTHEW FEINSTEIN	1.00	x		x				0.	0.	0 .
PRESIDENT (2) LANA SWARTZ	1.00	^		Δ				0.	0.	0 .
TREASURER	1.00	x		х				0.	0.	0 .
(3) DARREN BRIDENBECK	1.00	<u> </u>		Δ				0.	0.	0
SECRETARY	1.00	X		Х				0.	0.	0
(4) TIFFINIY CHENG	40.00								•	-
CO-DIRECTOR		1		х				40,108.	0.	0
(5) HOLMES WILSON	40.00							. ,		
CO-DIRECTOR		1		Х				33,703.	0.	0
		1								
		1								
		┨								
		1								
		1								
		1								
		1				L	L			
]								
		1								

Form 990		OR RIGH!	rs	11	N 2	7C.	rio	N	, INC	45-3	951	426	Pa	age 8
Part V	Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghes	t C	compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week (C) Position (do not check more than box, unless person is bot) officer and a director/trus			than o	an	(D) Reportable compensation from	(E) Reportable compensation from related		an	(F) timate nount other			
		(list any hours for related organizations below line)	or signal and signal a		organization (W-2/1099-MI	ıs	com fr organo	pensa om the anizat d relate	e ion ed					
1h Su	b-total							_	73,811.		0.			0.
c To	tal from continuation sheets to Part VI tal (add lines 1b and 1c)	I, Section A						> >	73,811.		0.			0.
	tal number of individuals (including but n mpensation from the organization	ot limited to th	ose	liste	ed at	bove	e) wh	o re	eceived more than \$100	0,000 of reportab	le		Yes	0 No
	d the organization list any former officer, e 1a? If "Yes," complete Schedule J for s											3	163	X
4 For	r any individual listed on line 1a, is the su d related organizations greater than \$150	ım of reportab 0,000? <i>If</i> "Yes,	le co " <i>co</i>	omp <i>mpl</i> e	ensa ete S	atior Sche	n and edule	oth J f	her compensation from for such individual	the organization		4		Х
rer	d any person listed on line 1a receive or a ndered to the organization? If "Yes," com B. Independent Contractors	•				•		elat	ed organization or indiv	idual for services		5		X
1 Co	e organization. Report compensation for										npens	ation f	rom	
	(A) Name and business address NONE (B) Description of services						С	(C ompe		n				
								+						
	tal number of independent contractors (i 00,000 of compensation from the organi	-	ot lii	mite	d to		se lis	ted	d above) who received n	nore than				
												Form 9	990 c	2013)

Pa	rt VII	Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any line				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts Tst	1 a	Federated campaigns	1a					
lg ä		Membership dues						
Am Am	С	Fundraising events	1c					
直		Related organizations						
in,	е	Government grants (contribut	ions) 1e					
ig ig	f	All other contributions, gifts, gran	ts, and					
혈취		similar amounts not included above	ve 1f	625,297.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines			605 005			
<u>a</u>	h	Total. Add lines 1a-1f			625,297.			
	_			Business Code				
je	2 a							
ine Se	b							-
E S	c d							
Program Service Revenue	u							
집	f	All other program service reve	enue					
		Total. Add lines 2a-2f						
	3	Investment income (including						
		other similar amounts)		▶ [3.			3.
	4	Income from investment of tax						
	5	Royalties		>				
			(i) Real	(ii) Personal				
		Gross rents						
				-				
		Rental income or (loss)						
		Net rental income or (loss)						
	<i>i</i> a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	h	Less: cost or other basis		 				
		and sales expenses						
	С	Gain or (loss)						
		Net gain or (loss)						
Other Revenue		Gross income from fundraising including \$	g events (not					
e e		contributions reported on line						
<u>بر</u>		Part IV, line 18	a					
풀	b	Less: direct expenses						
١	С	Net income or (loss) from fund	draising events					
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam		P				
	10 a	Gross sales of inventory, less						
	h	and allowances Less: cost of goods sold						
		Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
	11 a							
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d		▶ [
20000	12	Total revenue. See instructions.		>	625,300.	0.	0.	1
33200 10-29-	13							Form 990 (2013)

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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 (D) (A) Total expenses (B) Do not include amounts reported on lines 6b. Program service Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 98,021 98,021 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 11,541. 11,541. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 23,765. 23,765. 9 Payroll taxes 10 Fees for services (non-employees): Management 81. 81. Legal 22,444. 22,444. Accounting Professional fundraising services. See Part IV. line 17 Investment management fees _____ Other. (If line 11g amount exceeds 10% of line 25, 8,166. 8,166. column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 6,699. 6,699. 13 Office expenses Information technology 14 15 Royalties 5,280. 5,280. Occupancy 16 9,123. 9,123. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 Payments to affiliates 601. 601. 22 Depreciation, depletion, and amortization 23 Other expenses, Itemize expenses not covered 24 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.) 135,670. 135,670. PROGRAM AND DESIGN SERV OTHER EXPENSES 11,886. 11,886. b С d All other expenses 333,277. 294,329. 38,948. 0. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

Part X	Balance Sheet				
	Check if Schedule O contains a response or note to any line in this Part >	X			
			(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		118,786.	1	231,288
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net		59,297.	4	0
5	Loans and other receivables from current and former officers, directors,				
	trustees, key employees, and highest compensated employees. Complet	te			
	Part II of Schedule L			5	
6	Loans and other receivables from other disqualified persons (as defined				
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contri				
	employers and sponsoring organizations of section 501(c)(9) voluntary				
_ι	employees' beneficiary organizations (see instr). Complete Part II of Sch			6	
Assets	Notes and loans receivable, net			7	
8 §	Inventories for sale or use		2,460.	8	3,950
9	Prepaid expenses and deferred charges		7,560.	9	1,024
	Land, buildings, and equipment: cost or other		.,		
		007.			
h	Less: accumulated depreciation 10b	601.	0.	10c	2,406
11	Investments - publicly traded securities			11	,
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		0.	15	223,679
16	Total assets. Add lines 1 through 15 (must equal line 34)		188,103.	16	462,347
17	Accounts payable and accrued expenses		37,663.	17	19,884
18	Grants payable		,	18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	Loans and other payables to current and former officers, directors, truste				
<u>iti</u>	key employees, highest compensated employees, and disqualified perso				
Liabilities	Complete Part II of Schedule L			22	
تّ 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		37,663.	26	19,884
	Organizations that follow SFAS 117 (ASC 958), check here	and			
S S	complete lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets			27	
麗 28	Temporarily restricted net assets			28	
후 29	Permanently restricted net assets			29	
ឨ	Organizations that do not follow SFAS 117 (ASC 958), check here	· [X]			
<u>ö</u>	and complete lines 30 through 34.				
30 s	Capital stock or trust principal, or current funds		0.	30	0
^{တ္တ} 31	Paid-in or capital surplus, or land, building, or equipment fund		0.	31	0
Net Assets or Fund Balances 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Retained earnings, endowment, accumulated income, or other funds		150,440.	32	442,463
2 33	Total net assets or fund balances		150,440.	33	442,463
34	Total liabilities and net assets/fund balances		188,103.	34	462,347

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<u>Ш</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1			00.
2	Total expenses (must equal Part IX, column (A), line 25)	2			77.
3	Revenue less expenses. Subtract line 2 from line 1	3			23.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15	0,4	40.
5	Net unrealized gains (losses) on investments	5			
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	44	2,4	63.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Щ
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual 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?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

CENTER FOR RIGHTS IN ACTION, INC

OMB No. 1545-0047

Name of the organization

Employer identification number

45-3951426

Organiz	Organization type (check one):						
Filers o	f:	Section:					
Form 99	00 or 990-EZ	$oxed{X}$ 501(c)($oxed{4}$) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	00-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Note. O	nly a section 501(c)(s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
Genera	l Rule						
X	For an organization contributor. Compl	i filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II.					
Special	Rules						
	509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections o)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2%) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions of \$5,000 or more during the year						
Caution	. An organization th	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

CENTER FOR RIGHTS IN ACTION, INC

45-3951426

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PROTEUS ACTION LEAGUE 101 UNIVERSITY DRIVE, SUITE A2 AMHERST, MA 01002	\$ 100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CONSUMER ELECTRONICS ASSOCIATION 1919 S EADS ST ARLINGTON, VA 22202	\$\$20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	1630 FUND 1201 CONNECTICUT AVE NW SUITE 300 WASHINGTON , DC 20036	\$ 180,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	UNION SQUARE VENTURES 915 BROADWAY 19TH FLOOR NEW YORK, NY 10010	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	SV ANGEL 588 SUTTER ST #299 SAN FRANCISCO, CA 94102	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	LONDON TRUST MEDIA 2885 SANFORD AVE SW SUITE 20138 GRANDVILLE, MI 49418	\$65,000.	Person X Payroll

323452 10-24-13

Name of organization

Employer identification number

CENTER FOR RIGHTS IN ACTION, INC

45-3951426

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	990, 990-EZ, or 990-PF) (201

Name of org	ganization			Employer identification nu	ımber
001mp	D DOD DIGUES IN ASSISTAN	THE		45 3051436	
Part III	R FOR RIGHTS IN ACTION,	LNC vidual contributions to section	501(c)(7), (8),	45-3951426 or (10) organizations that total more than \$1,0	000 for the
	year. Complete columns (a) through (e) and the total of exclusively religious, charitable, et	he following line entry. For orga	nizations comp	or (10) organizations that total more than \$1,0 oleting Part III, enter (Enter this information once.)	
	Use duplicate copies of Part III if addition	ial space is needed.	iss for the year	- (Enter this information once.)	
(a) No. from	· · · · · · · · · · · · · · · · · · ·			(al) December of how wife in hal	l al
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is hel	ia
	-	-			
Ī		(e) Transfer	of gift		
-	Transferee's name, address, a	nd ZIP + 4	R	elationship of transferor to transferee	
		-			
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is he	Id
Part I	(b) Ful pose of gift	(c) Use of gift		(a) Description of now girt is nei	
Ī		(e) Transfer	of gift		
-	Transferee's name, address, a	nd ZIP + 4	R	elationship of transferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is he	ld
Part I		,,,,		.,,,,	
			_		
		(e) Transfer	of gift		
	Transferee's name, address, a	nd 7ID + 4	D.	olationship of transferor to transfero	
f	mansieree's name, address, a	III ZIP + 4	יח	elationship of transferor to transferee	
(a) No.					
from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is hel	ld
Part I					
ļ					
		(e) Transfer	of gift		
	Transferee's name, address, a	nd 7IP + 4	R	elationship of transferor to transferee	
ļ	. a so o namo, adal ess, a			s. a.	
		_			
				Schodulo B / Form 000, 000 E7, or 000	0 DE) (0040)

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

		CENTER FOR RIGHTS IN		INC	45-3951426
Paı	rt I Organiz	ations Maintaining Donor Advised F	unds or Oth	er Similar Funds or	Accounts. Complete if the
	organizat	on answered "Yes" to Form 990, Part IV, line 6.			
			(a) Donor ad	vised funds	(b) Funds and other accounts
1	Total number at	end of year			
2		outions to (during year)			
3		from (during year)			
4		at end of year			
5		ion inform all donors and donor advisors in writing	ng that the asset	s held in donor advised fu	unds
		on's property, subject to the organization's excl			
6		ion inform all grantees, donors, and donor advis			
	-	poses and not for the benefit of the donor or do	-	-	•
	•	vate benefit?			
Pai		vation Easements. Complete if the organiz			
1		nservation easements held by the organization (·
-		n of land for public use (e.g., recreation or educ		Preservation of an historic	ally important land area
		of natural habitat	. —	Preservation of a certified	
	Preservation	n of open space			
2		a through 2d if the organization held a qualified	conservation cor	tribution in the form of a	conservation easement on the last
	day of the tax ye				
	,				Held at the End of the Tax Year
а	Total number of	conservation easements			2a
b		tricted by conservation easements			
С		rvation easements on a certified historic structu			
d		rvation easements included in (c) acquired after			
	listed in the Natio	nal Register	·		2d
3		rvation easements modified, transferred, release			
	year >	· · · · · · · · · · · · · · · · · · ·		, ,	· ·
4	Number of states	where property subject to conservation easeme	ent is located		
5		ation have a written policy regarding the periodic		pection, handling of	
		forcement of the conservation easements it hole			Yes No
6		er hours devoted to monitoring, inspecting, and			
7	Amount of exper	ses incurred in monitoring, inspecting, and enfo	orcing conservati	on easements during the	year ▶ \$
8	Does each conse	rvation easement reported on line 2(d) above sa	atisfy the require	ments of section 170(h)(4))(B)(i)
	and section 170	1)(4)(B)(ii)?			Yes No
9	In Part XIII, desc	ibe how the organization reports conservation e	easements in its i	evenue and expense stat	ement, and balance sheet, and
	include, if applica	ble, the text of the footnote to the organization's	's financial stater	nents that describes the o	organization's accounting for
	conservation eas				
Pai	rt III Organia	ations Maintaining Collections of Ar	rt, Historical	Treasures, or Othe	r Similar Assets.
	Complete	if the organization answered "Yes" to Form 990), Part IV, line 8.		
1a	If the organization	n elected, as permitted under SFAS 116 (ASC 9	58), not to report	in its revenue statement	and balance sheet works of art,
	historical treasur	es, or other similar assets held for public exhibiti	ion, education, o	r research in furtherance	of public service, provide, in Part XIII,
	the text of the fo	otnote to its financial statements that describes	these items.		
b	If the organization	n elected, as permitted under SFAS 116 (ASC 9	958), to report in i	ts revenue statement and	balance sheet works of art, historical
	treasures, or oth	er similar assets held for public exhibition, educa	ation, or research	in furtherance of public s	service, provide the following amounts
	relating to these				
	(i) Revenues in	luded in Form 990, Part VIII, line 1			
	` '				
2	If the organization	n received or held works of art, historical treasur	res, or other simi	ar assets for financial gair	n, provide
	-	ounts required to be reported under SFAS 116 (A			
		ed in Form 990, Part VIII, line 1			
b	Assets included	n Form 990, Part X			• \$

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Schedule D (Form 990) 2013

	t III Organizations Maintaining Co	ollections of Ar	t, Hist	orical Tr	easures, o	r Othe	er Simila	ar Asse	ts (continu	ued)
3	Using the organization's acquisition, accession	n, and other record	s, check	any of the	following that	are a si	ignificant ι	use of its	collection	items
	(check all that apply):									
а	Public exhibition	d		oan or exc	hange program	ms				
b										
С										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5										
	to be sold to raise funds rather than to be mai							\square	Yes	☐ No
Pa	t IV Escrow and Custodial Arrang								ine 9, or	
	reported an amount on Form 990, Part			J						
1a	Is the organization an agent, trustee, custodia	n or other intermed	liary for o	contribution	ns or other ass	ets not	included			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a									
	, ,	•	Ü						Amount	
С	Beginning balance						1c			
	Additions during the year									
е	Distributions during the year									
f	Ending balance									
	Did the organization include an amount on For	m 990. Part X. line	21?						Yes	No
	If "Yes," explain the arrangement in Part XIII. (
	t V Endowment Funds. Complete if									
		(a) Current year		rior year	(c) Two years		(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance	(,	(,	,	(-,		(-)		(-)	<u>, </u>
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities					1				
·	and programs									
f	Administrative expenses									
	End of year balance					-				
g	Provide the estimated percentage of the curre	ent voor ond bolono	o (lino 1e	n oolumn (a)) hold as:					
2				y, coluitiit (a	a)) Helu as.					
a	Board designated or quasi-endowment ▶ _ Permanent endowment ▶	%	_%							
b										
С	Temporarily restricted endowment									
0-	The percentages in lines 2a, 2b, and 2c should	•	. 4 41			6 41				
Зa	Are there endowment funds not in the posses	sion of the organiza	ation tha	t are neid a	ina aaminister	ea tor ti	ne organiz	ation	Г,	<u>, </u>
	by:									Yes No
	(i) unrelated organizations								3a(i)	_
	(ii) related organizations								3a(ii)	_
	If "Yes" to 3a(ii), are the related organizations								3b	
4	Describe in Part XIII the intended uses of the		wment f	unds.						
Pa	t VI Land, Buildings, and Equipme		D	" 44 0		D	" 40			
	Complete if the organization answered							.		
	Description of property	(a) Cost or of			t or other		ccumulate	d	(d) Book	value
		basis (investn	nent)	pasis	(other)	aep	oreciation			
1a	Land									
b	Buildings									
С	Leasehold improvements				2 005					100
d	Equipment				3,007.		6 (01.	- 2	406.
	Other									100
Tota	LAdd lines 1a through 1e (Column (d) must ea	ual Form 990 Part	X colum	n (R) line 1	1()(c))				•	,406.

Schedule D (Form 990) 2013

Part VII	Investments - Other Securities.				
D	Complete if the organization answered "Yes"				
• •	otion of security or category (including name of security)	(b) Book value	(c) Method of	valuation: Cost or en	d-of-year market value
	al derivatives				
	-held equity interests				
(3) Other (A)					
(A) (B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments - Program Related.				
	Complete if the organization answered "Yes"				
	(a) Description of investment	(b) Book value	(c) Method of	valuation: Cost or en	d-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6) (7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11d. See Form 990	, Part X, line 15.	
		Description			(b) Book value
(1) DU	JE TO AFFILIATE				223,679.
(2)					
(3)					
(4)					
(5)					
(6) (7)					
(8)					
(9)					
	umn (b) must equal Form 990, Part X, col. (B) line	e 15.)		•	223,679
Part X	Other Liabilities.				, , , , , , , , , , , , , , , , , , , ,
	Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11e or 11f. See For	m 990, Part X, line 25	5.
1.	(a) Description of liability	İ	(b) Book value		
(1) Fed	deral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)				_	
(7)				_	
(8)					
(9)	(h) must a sud 5 = 200 5 + 1/2 **	- 05)		-	
	umn (b) must equal Form 990, Part X, col. (B) line			financial to the second	46-4 1 - 11
	r for uncertain tax positions. In Part XIII, provide				
organiz	ation's liability for uncertain tax positions under	FIN 48 (ASC 740). C	neck nere if the text of t		
				Scl	nedule D (Form 990) 2013

332053

Par	rt XI Reconciliation of Revenue per Audited Finan	icial Statements With Revenue per F	Return.
	Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial states	ments	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е			2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	:	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
С			4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part		5 D-1
Pai	rt XII Reconciliation of Expenses per Audited Final		Return.
	Complete if the organization answered "Yes" to Form 990, F		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	
а	Donated services and use of facilities		4
b	Prior year adjustments	1 - 1	-
C	Other losses		-
d	Other (Describe in Part XIII.)	· · · · · · · · · · · · · · · · · · ·	-
е			2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	
a	Investment expenses not included on Form 990, Part VIII, line 7b		-
b	A alal Para - 4 - and 46	1.0	4.
_	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Pa</i>	pet I line 19 \	4c 5
5 Pai	rt XIII Supplemental Information.	art 1, iii le 10.)	ɔ
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, line	os 1a and 4: Part IV lines 1b and 2b: Part V line	1: Part Y line 2: Part YI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to		4, 1 art X, iii 6 2, 1 art Xi,
100	Za ana 45, ana 1 ar 701, imos Za ana 45.7166 complete tino part to	provide any additional information.	
			<u> </u>

SCHEDULE O (Form 990 or 990-EZ)

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.

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Ope
Ins

Name of the organization **Employer identification number** CENTER FOR RIGHTS IN ACTION, INC 45-3951426 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INCLUDING BUT NOT LIMITED TO: INFLUENCING THE PUBLIC DISCOURSE REGARDING COPYRIGHT ISSUES; ADVOCATING TO PROTECT THE OPEN, NEUTRAL INTERNET FROM THOSE WHO SEEK TO RESTRICT CREATIVITY; AND GENERALLY SEEKING TO ENCOURAGE INDIVIDUAL POWER AND FREEDOM. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: SERVE THEIR INTERESTS. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE ORGANIZATION RECEIVES THE FORM 990 FROM THE ACCOUNTANT AND IT IS REVIEWED. IF QUESTIONS OR ISSUES ARISE DURING THE REVIEW THEY ARE ANSWERED. AN OFFICER OF THE ORGANIZATION THEN SIGNS THE AUTHORIZATION AND IT IS RELEASED BY THE ACCOUNTANT. FORM 990, PART VI, SECTION B, LINE 15: EXPLANATION: WE REVIEW COMPARABILITY DATA OF LIKE ORGANIZATIONS AND THE BOARD APPROVES COMPENSATION AMOUNTS THAT ARE ARRIVED AT. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: UPON WRITTEN REQUEST THE FEDERAL AND STATE FILINGS AND

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

GOVERNING DOCUMENTS WILL BE PROVIDED IN A TIMELY FASHION.

Schedule O (Form 990 or 990-EZ) (2013)

)RAFT

Department of the Treasury

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

990

OMB No. 1545-0172

Internal Revenue Service Name(s) shown on return Business or activity to which this form relates Identifying number CENTER FOR RIGHTS IN ACTION, FORM 990 PAGE 10 45-3951426 INC Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (b) Cost (business use only) (a) Description of property 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 **15** Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2013 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery period (business/investment use only - see instructions) (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction 19a 3-year property 3,007. 5 YRS. HY 200DB 601. b 5-year property 7-year property С d 10-year property 15-year property е f 20-year property S/L 25-year property 25 yrs. g 27.5 yrs MM S/L h Residential rental property 27.5 yrs. MM S/L MM S/L i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs. S/L 40 yrs. 40-year MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 601.

LHA For Paperwork Reduction Act Notice, see separate instructions.

23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs.

Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.

23

Form 4562 (2013)

CENTER FOR RIGHTS IN ACTION, INC

45-3951426 Page 2

OIIII	100_	(=0.10)			-								<u> </u>
Part	: V			(Include	automobile	s, certain ot	her vehicles	, certain com	nputers,	and property	used for entertainme	nt, recreation	ı, o
		amus	sement.)										

04			on and Other I												Τ.
248	Do you have evidence to s			nt use cla	aimed?	<u> Ч</u> Ү	es L	⊔ No	24b If "Y			nce writt	ten? L	J Yes ∟	<u>No</u>
	(a) Type of property (list vehicles first)	(a) Type of property list vehicles first) (b) Date Business placed in service use percenta				stment	I LECOVELY IVI				h) eciation uction				
<u></u>	Special depreciation allo	owance for c	ualified listed p	roperty	placed i	n servic	e durin	g the ta	ax year an	d					
	used more than 50% in										25				
<u> 26</u>	Property used more tha	n 50% in a c	ualified busine	ss use:											
_		1 1	%	+											
		1 1	%	+		_									
_	D 1500/	<u> </u>	%												
27	Property used 50% or le	ess in a quai T		_						0.//					
_		1 1	%	+						S/L -					
_		1 1	%	+						S/L -					
28	Add amounts in column	(h) lines 25			and on	line 21	nage 1				28				
	Add amounts in column												29		
	7 ad amounts in column	(1), 11110 20. 1			3 - Inforr								. 20	l	
Co	mplete this section for ve	hicles used	_				_			or related	d persor	n. If you p	provided	l vehicle:	S
to y	our employees, first ans	wer the que	stions in Sectio	n C to s	see if you	meet a	ın excep	otion to	completi	ng this s	ection f	or those	vehicles	S.	
										·					
			a)		o)		(c)	(d)		(e)		(f)			
30		otal business/investment miles driven during the		Vehicle		Vehicle		V	ehicle	Veh	iicle	Vehicle		Vehicle	
	year (do not include comr														
	Total commuting miles of														
32	Total other personal (no driven	-	•												
33	Total miles driven during Add lines 30 through 32														
34	Was the vehicle availab			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?														
35	Was the vehicle used p	rimarily by a	more												
	than 5% owner or relate	ed person?													
36	Is another vehicle availa	ble for perso	onal												
	use?														
			- Questions fo	-	-										
	swer these questions to	determine if	you meet an ex	ception	to comp	oleting S	Section	B for v	ehicles us	ed by er	nployee	s who a ı	r e not m	ore than	5%
_	ners or related persons.			م منامانما		-1	ا منامان کا	!!			h			V	Na
31	Do you maintain a writte employees?		-		-				-	-		r		Yes	No
	Do you maintain a writte		tement that nro												
38	employees? See the ins		-	-				-							
38	Do you treat all use of v														
	Do you provide more that														
39				-				-							
39		anu retain ti													
39 40	the use of the vehicles,		erning qualified												
39 40		ements conc			ot comple	te deci	ו טווטוו	ii liile C	overeu ve						
39 40 41	the use of the vehicles, Do you meet the require	ements conc			ot comple	ere deci	IIOII D IC	ir the c	overed ve						
39 40 41	the use of the vehicles, Do you meet the require Note: If your answer to	ements conc 37, 38, 39, 4	0, or 41 is "Yes			(c) Amortizab		The C	(d) Code section		(e) Amortiza period or per		Ar fc	(f) mortization or this year	
39 40 41	the use of the vehicles, Do you meet the require Note: If your answer to sart VI Amortization (a)	ements conc 37, 38, 39, 4	O, or 41 is "Yes	(b) mortization legins		(c) Amortizab		l line c	(d) Code		Amortiza		Ar fc	nortization	
39 40 41	the use of the vehicles, Do you meet the require Note: If your answer to sart VI Amortization (a) Description of	ements conc 37, 38, 39, 4	O, or 41 is "Yes	(b) mortization legins		(c) Amortizab			(d) Code		Amortiza		Ar fo	nortization	
39 40 41	the use of the vehicles, Do you meet the require Note: If your answer to sart VI Amortization (a) Description of	ements conc 37, 38, 39, 4	O, or 41 is "Yes	(b) mortization legins		(c) Amortizab			(d) Code		Amortiza		Ar fc	nortization	
39 40 41 P	the use of the vehicles, Do you meet the require Note: If your answer to sart VI Amortization (a) Description of	ements conc 37, 38, 39, 4 f costs at begins du	Date a buring your 2013	(b) mortization egins tax yea	ar:	(c) Amortizab amount	ole		(d) Code section		Amortiza		Ar fc	nortization	