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2008

OMB No 1545-1150

Form 990-EZ

Department of the Treasury Internal Revenue Service

## **Short Form Return of Organization Exempt From Income Tax**

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

 $\blacktriangleright$  Sponsoring organizations and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form Fig. The organization may have to use a copy of this return to satisfy state reporting requirements.

**Open to Public** Inspection

			r year, or	tax year beginning 10-01-2008	, and ending 09	-30-2009			
_	heck if a ddress o	applicable	Please	C Name of organization Montana Trial Lawyers Association			D Emple	oyer identification	n number
	adress c ame ch		use IRS label or	Number and street (or P O box, if mail is	not delivered to street a	ddress) Room/suits	81-0385019		
	ntial ret		print or type.	PO Box 838	not delivered to street a	uuress) koom/suite	<b>E</b> Teleph	one number	
	emınat		See					(406) 443-3124	
_	mended		Specific Instruc-	City or town, state or country, and ZIP + 4 Helena, MT 59624			F Group Numbe	Exemption	
I A	pplicatio	on pending	tions.	,			Name	- F	
<b>+</b> Se	ction .			ns and 4947(a)(1) nonexempt char mpleted Schedule A (Form 990 or 99		<b>G</b> Accounting me Other (specify)		Cash Acc	rual
τw	eheit e	: <b>-</b> WWW MC	ONTTLA C	OM		H Check ► 🔽		organızatıon	
				(insert no ) 4947	(a)(1) or 527	is <b>not</b> require		ach 0, 990-EZ, or 9	90-PF)
		_	· · · · · ·	s not a section 509(a)(3) supporting					•
				l, but if the organization chooses to file					
				etermine gross receipts, if \$1,000,000 or more			<b>▶</b> \$		,216
Pa	rt I			nses, and Changes in Net Asso	ets or Fund Bala	ances (See the in	structio		
	1		, , , , ,	rants, and similar amounts received			F	1	
	2			nue including government fees and coi	itracts		-		177,216
	3			assessments			F		100,990
	4	Investment					.  -	4	10
	5a	Gross amou	nt from sa	le of assets other than inventory .		5a			
Ę	b			isis and sales expenses		5b			
Revenue	С	Gain or (loss	s) from sa	le of assets other than inventory (Sub	tract line 5b from lir	ne 5a) (attach sche	dule)	5с	
ď	6	Special ever	_	tivities (complete applicable parts of	Schedule G) If any	amount is from <b>gai</b>	ning,		
	а	Gross reven	iue (not in	cluding \$ of contributions					
		reported on	lıne 1)			6a			
	b	Less direct	expenses	other than fundraising expenses .		6b			
	С	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)							
	_						-	6c	
	7a			ory, less returns and allowances .		7a			
	b	Less cost o	_			7b			
	C	Gross profit	or (loss) i	from sales of inventory (Subtract line	/ b from line / a)		•	7c	
	8	Other reven	ue (descri	be 🕨			,	8	
	9		•	es 1, 2, 3, 4, 5c, 6c, 7c, and 8) .		•		9	278,216
	10	Grants and	sımılar am	nounts paid (attach schedule)				10	
	11	Benefits pai					F	11	
	12	•					.		150,235
Ň	13	,	•	other payments to independent contra	actors		Ē	13	1,106
i Se	14			ties, and maintenance			·	14	19,935
Expenses	15		•	postage, and shipping			·	15	15,749
ш	16			_			.  -		130,343
	17	Other exper		ribe <b>F</b> <u> </u>			<del></del> )		317,368
<u></u>	18	<u> </u>	<u> </u>	the year (Subtract line 17 from line 9					-39,152
3.9 e.G							-	18	
NetAss	19			lances at beginning of year (from line 2	27, column (A )) (mu	ist agree with			
Ž				orted on prior year's return)				19	91,681
	20			assets or fund balances (attach expla			•	20	3,921
	21			lances at end of year (combine lines 1		•	•	21	56,450
Pa	rt II	Balance		—If Total assets on line 25, column (E					
			-	he instructions for Part II)	<u> </u>	(A) Beginning of ye		(B) End of y	
	·	, savings, and		ents		83,79	_	-	48,872
		and buildings			· · · ·	7.00	23		7 570
		assets (desc	cribe 🏲 😇		——————————————————————————————————————	7,88	-		7,578
		assets .	oonba 🏪		· · · .	91,68		-	56,450
		liabilities (de	-	(line 27 of column (B) <b>must</b> agree with	)	91,68	0 26		56,450
	110 t d	Joees or Fulla		time 27 or coralini (D) <b>must</b> agree with	( )	91,00	-  -/	I	55,750

Part IIII Statement of Progra	m Service Accomplishn	nents (See the instruction	ns for Part III )		Expenses
What is the organization's primary exem THE MONTANA TRIAL LAWYERS ASS MONTANA ATTORNEYS WHO REPRES THE ACCUSED, AND THOSE WHOSE	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)				
Describe what was achieved in carrying describe the services provided, the nuntitle					
28 MONTANA TRIAL LAWYERS ASSO EDUCATION SEMINARS, ACTIVELY PRESERVE THE CIVIL JURY TRIAL SY THEIR CLIENTS, AND PROVIDES SUITHEIR PROFESSION AND IN THEIR STATES (Grants \$ 0)	INFORMS, EDUCATES AND L 'STEM AND ON OTHER ISSU PPORT AND SERVICES TO E	OBBIES ELECTED OF SES OF CONCERN TO NABLE ITS MEMBERS	FICIALS TO ITS MEMBERS AND TO EXCEL IN	28a	141,559
<b>29</b> (Grants \$ ) If	this amount includes foreign	grants.check here	▶⊏	29a	
30	this amount includes foreign	·	,		
<b>31</b> O ther program services (attach scho				30a 31a	
32 Total program service expenses (add	lines 28a through 31a) .		▶	32	141,559
Part IV List of Officers, Directors,	Trustees, and Key Employees.	List each one even if not co	mpensated (See the ins	tructions	for Part IV )
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions employee benefit p deferred compens	lans &	(e) Expense account and other allowances
See Additional Data Table					

must be completed instead of Form 990-EZ.

Form	990-E	Z (2008)							Page <b>4</b>
Par	t VI	Section 501(c)(3) orga	<b>nizations only.</b> All an	. , , , ,	organızatıons	must answer	questi	ons 46	5-49
		complete the tables for lir		iu					
46	Did th	ne organization engage in direct		npaign activities on be	half of or in opp	osition to		Yes	No
		dates for public office? If "Yes,"	·				46		
47	Did th	ne organization engage in lobbyi	ng activities? If "Yes,"	complete Schedule C	, Part II		47		
48		e organization operating a schoo	-			e Schedule E	48		
		ne organization make any transfe					49a		
		s," was the related organization					49b		
		lete this table for the five highe			rs. directors. tri	ıstees, and kev	emplo	vees) w	ho
		ved more than \$100,000 of com						, , , , , , , , , , , , , , , , , , , ,	
(a) i		and address of each employee d more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	on employee i	tributions to penefit plans & compensation	(e) Expense account and other allowances		
Total	numb	er of other employees paid over \$100,000 <b>►</b>							
E1	Comp	elete this table for the five highe	st companyated indone	ndent contractors who	a a sh ra sa wad	more than \$10	0.0007		
		ensation from the organization			- each received	more than \$10			
	(a) Na	ame and address of each indepe	ndent contractor paid n	nore than \$100,000	<b>(b)</b> Type	ofservice	(c) C	ompen	sation
Total	numb	er of other independent contract	tors receiving over \$10	0,000					
				·	ng schodulas and st	atomonts and to	the best	of mu kn	owlodao
		Under penalties of perjury, I declare to and belief, it is true, correct, and com							
Plea Sign		***** Signature of officer			2010- Date	11-11			
Here		Al Smith Executive Director							
		Type or print name and title							
Paid		Preparer's Donald W Laine		Date	Check if self-empolyed	Preparer's PTIN	(See Ger	n Inst X)	
Prepa		Firm's name (or yours if self-employed),	urMuehlen & Co PC		· · · · ·	EIN Þ			
Use (	ווע ו	address, and ZIP + 4 PO Box 104	10				1063 442	1040	
		Helena, MT	59624			Phone no 🕨 (4	106) 442-	1040	

May the IRS discuss this return with the preparer shown above? See instructions  $\dots \dots \dots$ 

No

Yes

**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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

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

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

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

- ◆ 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

If th	· / · /	es," to Form 990, Part IV, Line 5 (		(n)) Complete Part I-B Do n	iot complete Part II-A			
N a	ame of the organization ontana Trial Lawyers Association	zations complete rait iii		Employer iden	tification number			
Par	rt I-A To be completed	by all organizations exemp	t under section	81-0385019	527			
		ee the instructions for Schedule		11 501(c) and section				
1	Provide a description of the or	rganızatıon's dırect and ındırect pol	litical campaign act	civities in Part IV				
2	Political expenditures				\$			
3	V olunteer hours							
Pai	rt I-B To be completed for Schedule C for c	by all organizations exemp letails.)	t under section	n <b>501(c)(3).</b> (See the	instructions			
1	Enter the amount of any excis	e tax incurred by the organization	under section 4955	;	\$			
2	Enter the amount of any excis	e tax incurred by organization man	agers under sectio	n 4955	\$			
3	If the organization incurred in	a section 4955 tax, did it file Form	n 4720 for this year	-7	┌ Yes ┌ No			
4a	Was a correction made?				┌ Yes ┌ No			
ь								
Pai		<b>by all organizations exemp</b> s for Schedule C for details.)	t under section	n 501(c), except sect	tion 501(c)(3).			
1	•	ended by the filing organization for	section 527 exemp	ot function activities	\$			
2	Enter the amount of the filing 527 exempt funtion activities	organızatıon's ınternal funds contrı	buted to other orga	nızatıons for section	\$			
3	Total of direct and indirect ex 1120-POL, line 17b	empt function expenditures Add lii	nes 1 and 2 and ent	er here and on Form	\$			
4	Did the filing organization file	Form 1120-POL for this year?			┌ Yes			
5	were made Enter the amount political contributions receive	nd Employer Identification Number paid and indicate if the amount was d and promptly and directly deliver action committee (PAC) If additio	paid from the filing ed to a separate po	g organization's own interna olitical organization, such a	l funds or were s a separate			
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-			

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

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2008

**d** Grassroots non-taxable amount

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

Grassroots lobbying expenditures

P	art II-A To be completed by (election under sec						768
A	Check If the filing organization	belongs to an affili	ated group				
<u>B</u>	Check If the filing organization  Limits on Lo  (The term "expenditure	bbying Expend	ditures—		oly	(a) Filing Organization's Totals	( <b>b</b> ) Affiliated Group Totals
	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
ь					<u> </u>		
c	Total lobbying expenditures (add line	s 1a and 1b)			F		
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	add lines 1c and 1	Ld)				
f	Lobbying nontaxable amount Entert	he amount from th	e following table	ın both			
	columns—  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$17,000,000  Over \$17,000,000  Over \$17,000,000  S175,000 plus 10% of the excess over \$1,000,000  \$225,000 plus 5% of the excess over \$1,500,000  Over \$17,000,000  \$1,000,000						
	Grassroots nontaxable amount (ente	r 25% of line 1f)					
h	Subtract line 1g from line 1a Enter -	0 - ıf lıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter - (	)- ıf lıne f ıs more t	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or line 11, did the	organization file	Form 4720 repo	orting	┌─ Yes
	(Some organizations that columns below. S	See the instruc	on 501(h) elections for line	ection do not es 1a througl	have to con		he five
_	Lobb	ying Expendit	ures During	4-Year Avera ⊤	iging Period	1	1
	Calendar year (or fiscal beginning in)	year	<b>(a)</b> 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) Total
2a	Lobbying non-taxable amount						
ь	Lobbying ceiling amount (150% of line 2a, column(e))						
	: Total lobbying expenditures						

che	edule C (Fo	orm 990 or 990-EZ) 200	0.8					Р	age <b>3</b>
Pa	rt II-B		by organizations exempt und der section 501(h)). (See the				led	Form	
					(a	a)		(b)	
					Yes	No		A mour	it
1			anization attempt to influence foreign,						
	_		t to influence public opinion on a legis	lative matter or					
а	Voluntee	um, through the use of				l			
b			le compensation in expenses reported	on lines of through 1)?			-		
c		lvertisements?	ie compensation in expenses reported	- Industrial Control of the Control			+		
d		to members, legislators	or the public?	-					
e		ions, or published or bro		-					
f		o other organizations for							
g			heir staffs, government officials, or a le	egislative body?					
h		-	rs, conventions, speeches, lectures, o	· -					
i		tivities If"Yes," descri		, <u> </u>					
j		es 1c through							
_	11	-							
2a			the organization to be not described i	n section 501(c)(3)?			4		
		·	tax incurred under section 4912						
			tax incurred by organization managers						
			a section 4912 tax, did it file Form 47						
ar	t III-A		by all organizations exempt u		ction	501(	c)(5	), or	
		section sor(c)(o)	. (See the instructions for Schedi	die C for details.)				Yes	No
1	Were sub	ostantially all (90% or m	nore) dues received nondeductible by i	members?		ſ	1	1.05	No
2		· · ·	n-house lobbying expenditures of \$2,0			t	2		No
3		•	ryover lobbying and political expendit			F	3		Νο
Par			by all organizations exempt (		ction	501(	c)(5	), or	l
		section 501(c)(6)	if BOTH Part III-A, questions	1 and 2 are answered "No"					
			wered "Yes." (See the instruction	ons for Schedule C for details.)					
1	•	sessments and similar a			<u> </u>	1 \$		14	5,906
2			obbying and political expenditures <b>(do</b> o <b>527(f) tax was paid).</b>	not include amounts of political					
а	Current `		. 527(1) tax tras para).			2a \$		3	9,443
		er from last year			Ī	2b\$		-16	8,909
c	Total				-	2c \$			9,466
3	Aggrega	te amount reported in se	ection 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	Ī	3 \$		4	4,084
4	Ifnotice	s were sent and the amo	unt on line 2c exceeds the amount on	line 3, what portion of the excess	Ī				
		-	arryover to the reasonable estimate of	nondeductible lobbying and politica					
_	•	ure next year?		2 14)		4 \$			2 5 5 6
5			political expenditures (line 2c total mi	nus 3 and 4)		5 \$		-1/	3,550
	art IV	Supplemental Inf							
		s part to provide the des te this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, and	Part I	I-B, line	e 1 i		
		Ident if ier	Return Reference	Explanat	ion				

1dent if ier	Ket urn Kererence	Explanation				

Part IV Supplemental Information						
Ident if ier	Return Reference	Explanation				

Schedule C (Form 990 or 990EZ) 2008

DLN: 93492315010190

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization** (Including Information on Listed Property)

Attachment

		See separate instructions	s. 🟲 Attach	to your tax r	eturn.			Sequence No <b>67</b>
Name(s) shown on return		Business or a	ctivity to which	this form re	ates	Iden	t if y ing	number
Montana Trial Lawyers Ass	sociation	F 000 F7	D 1			01.0	2050	1.0
Part I Election 7	To Evnonco (	Form 990-EZ Certain Property Un		170		81-0	3850	19
	•	isted property, comple			nnlete Par	tΙ.		
		for a higher limit for cert					1	250,000
		ced in service (see instru				_	2	
		y before reduction in limit	•	uctions)		•	3	800,000
			-	detions,	• •	•	4	000,000
		from line 2 If zero or les	· ·			•	-	
	•	line 4 from line 1 If zero	or less, enter -	u- Ir married	i filing		_	
separately, see instruc	tions			• • •	• •	• •	5	
			(h) Cost	(business us				
<b>(a)</b> D	escription of pro	pperty		only)	(c) El	ected	cost	
6								1
7 Listed property Enter	the amount from	line 29		. 7				_
8 Total elected cost of s	ection 179 prop	erty Add amounts in coli	ımn (c), lınes 6	and 7 .			8	
9 Tentative deduction E	nter the <b>smaller</b>	of line 5 or line 8 .					9	
10 Carryover of disallowed			rm 4562				10	
11 Business income limitation		·		ee instructions)			11	
							12	
12 Section 179 expense of				. —	· · ·	•	12	
13 Carryover of disallowed		<u>`</u>		· <b>P</b> 13				
Note: Do not use Part .			·		<b>4</b> l l l			
•		Allowance and Other					Торегту	(See Instructions)
14 Special depreciation al tax year (see instruction)		illied property (other than	insted property	) placed ili s	ervice durii	ig the	14	
15 Property subject to sec	•	election			_	_	15	
16 Other depreciation (inc						-	16	1,542
		Do not include listed p	roperty ) (Se	e instruction	ns )	•		1,542
TIMORE DO	procideron (		ction A	se mod dedic	J1131 /			
17 MACRS deductions for	assets placed i			. 800			17	330
18 If you are electing t	o group any a	ssets placed in service	e during the t	ax vear into	o one or n	nore		
<del>-</del>		re	<del>-</del>	=		_		
	<u> </u>	Service During 200					recia	tion System
		(c) Basis for						,
(a) Classification of	(b) Month and	depreciation	(d) Recovery					(g)Depreciation
property	year placed in	(business/investment use	period	(e) Conven	tion (f)	Metho	od	deduction
	service	only—see instructions)						
<b>19a</b> 3-year property		,						
<b>b</b> 5-year property								
<b>c</b> 7 - year property								
<b>d</b> 10-year property								
<b>e</b> 15-year property								
<b>f</b> 20-year property								
<b>g</b> 25-year property			25 yrs		9	5/L		
<b>h</b> Residential rental			27 5 yrs	MM	9	5/L		
property			27 5 yrs	мм	9	5/L		
i Nonresıdentıal real			39 yrs	ММ	9	5/L		
property				MM		5/L		
Sect io	n C—Assets Plac	ced in Service During 2008	3 Tax Year Usin	gthe Alterna	t ive Depre	ciat ior	Syste	em
<b>20a</b> Class life						S/L		
<b>b</b> 12-year			12 yrs		1	S/L		
c 40-year			40 yrs	MM		S/L		
	y (See instruc							
21 Listed property Enter						•	21	
<b>22 Total.</b> Add amounts fro and on the appropriate	•	14 through 17, lines 19 urn Partnerships and S c			ne 21 Enter	here	22	1,872
23 For assets shown abov	·	·	·	e	<u> </u>			
portion of the basis att		=		23				

Form 4562 (2008) Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and Part V property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (i) (e) (b) Business/ (d) (h) (a) (g) Basis for depreciation Flected Type of property (list Date placed in investment Cost or other Recovery Method/ Depreciation/ section 179 (business/investment Convention deduction vehicles first) service basis use period cost use only) percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -% S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 1 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? . . . . . **36** Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? \_ . . . . . . 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e) (d) (f) (c) (a) Date A mortization A mortizable Code A mortization for Description of costs amortization period or

### amount section this year beains percentage 42 A mortization of costs that begins during your 2008 tax year (see instructions) 43 A mortization of costs that began before your 2008 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44

## **TY 2008 Other Assets Schedule**

Name: Montana Trial Lawyers Association

**EIN:** 81-0385019

Description	Beginning of Year Amount	End of Year Amount
Other Depreciable Assets	7,889	7,578

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93492315010190

## **TY 2008 Other Changes in Net Assets Schedule**

Name: Montana Trial Lawyers Association

**EIN:** 81-0385019

Description	Amount
Unrealized Gain on Investments	3,921

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## **TY 2008 Other Expenses Schedule**

Name: Montana Trial Lawyers Association

**EIN:** 81-0385019

Description	Amount
Dues and Subscriptions	1,630
Consumer Protection Fund	46,472
Conferences and Conventions	79,338
Supplies	1,273
Student Chapters and Grants	112
Miscellaneous	1,518

# **TY 2008 Transfers Personal Benefits Contracts Declaration**

Name: Montana Trial Lawyers Association

**EIN:** 81-0385019

**Declaration:** The organization did not, during the year, receive any funds,

directly, or indirectly, to pay premiums on a personal benefit contract. The organization, did not, during the year, pay any premiums, directly, or indirectly, on a personal benefit contract.

Software ID: Software Version:

**EIN:** 81-0385019

Name: Montana Trial Lawyers Association

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees					
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances	
AL SMITH PO BOX 838 HELENA,MT 59624	executive director 40 00	89,870	15,986	0	
Bobby Anner-Hughes PO Box 1156 Billings,MT 591031156	Director 1 00	0	0	0	
Elizabeth Best PO Box 2114 Great Falls, MT 59403	Director 1 00	0	0	0	
Daniel Bidegaray 676 Ferguson Ave Suite 1 Bozeman, MT 59718	Director 1 00	0	0	0	
Alexander Blewett III PO Box 2807 Great Falls,MT 59403	Director 1 00	0	0	0	
Daniel Buckley 2040 North 22nd Street Suite 2 Billings, MN 59718	Director 1 00	0	0	0	
Jamie Carey 2601 East Broadway HELENA,MT 59601	Director 1 00	0	0	0	
Michael Cok PO Box 1105 Bozeman,MT 597711105	Director 1 00	0	0	0	
E Craig Daue PO Box 8209 Missoula,MT 59807	Director 1 00	0	0	0	
Amy Poehling Eddy 1230 Whitefish Stage Road Kalispell, MT 59901	Secretary/Treasurer 1 00	0	0	0	
Michael George PO Box 3505 Great Falls, MT 59403	Director 1 00	0	0	0	
Heather M Latino PO Box 8131 Missoula, MT 598028131	Director 1 00	0	0	0	
Michael J McKeon PO Box 3329 Butte, MT 59702	Director 1 00	0	0	0	
Syd McKenna 815 E Front St 4A Mıssoula, MT 598077009	President 1 00	0	0	0	
James Molloy PO Box 1182 HELENA,MT 59624	President-Elect 1 00	0	0	0	
Michael Sand 25 Apex Drive Suite A Bozeman, MT 59718	Director 1 00	0	0	0	
J David Slovak PO Box 2325 Great Falls,MT 59403	Director 1 00	0	0	0	
Roger Sullivan Jr 745 South Main Kalispell, MT 59901	Vice-President 1 00	0	0	0	
Larry Anderson PO Box 2608 Great Falls,MT 59403	Past President/Ex Officio 1 00	0	0	0	
Karl Englund PO Box 8358 Missoula, MT 598078358	Director 1 00	0	0	0	
Michael lamb 2601 East Broadway HELENA,MT 59601	Director 1 00	0	0	0	
James Manley 201 4th Ave E Polson, MT 59860	Director 1 00	0	0	0	
Mike Meloy PO Box 1241 HELENA,MT 59624	Director 1 00	0	0	0	
Wade Dahood 113 East Third Street Anaconda, MT 59711	Director Emeritus 1 00	0	0	0	
William Rossbach PO Box 8988 Missoula, MT 59807	AAJ Representative 1 00	0	0	0	
Joe R Bottomly 1230 Whitefish Stage Road Kalispell, MT 59901	AAJ Representative 1 00	0	0	0	
Kurt Jackson PO Box 2807 Great Falls, MT 59403	AAJ Representative 1 00	0	0	0	