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Form 990-EZ

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

	Dep-	ertment nai Rev	of the Treasury of the Treasury of the Treasury of the Treasury of the Organizations with gross receipts less than \$500,000 and total assets less than \$1,250, and Service The organization may have to use a copy of this return to satisfy	d in section 5 ,000 at the er	ind of the year	t file Form	990 All his form.	Open to Public Inspection
			e 2009 calendar year, or tax year beginning	and endi		<u>un en lei</u>	113.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	B	Check if	C Name of proapization	and ona	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	D Emplo	ver iden	tification number
		Addre	S Juse IRS MONITANIA DEFENCE MOTAT TAUVEDO TNO		ŀ	D Cilipic	,,0,,10011	
	⊨	l chang	labelor MONTANA DEFENSE INTAL LAWIERS INC			0.1	042	0.45.2
	느	Name chang Initia					_	8452
	느	retun	See Number and street (of P O box, it mail is not delivered to street address)	l.	oom/suite	•	hone nun	
		Term bets	Instruc-	A		40	6-44	3-1160
		Amer	The state of the s		}	F Group	Exempti	ion
		Applic pendir	HELENA, MT 59601			Numb		
		• Sec	tion 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a comp	pleted	G Accoun			Cash Accrual
			Schedule A (Form 990 or 990-EZ).			pecify)		
		Websit						rganization is not
			empt status (check only one) — 🔀 501(c) (6) ◀ (insert no) 🔲 4947(a)(1) or	527	required to	attach S	chedule	B (Form 990, 990-EZ or 990-PF)
	K (Check	If the organization is not a section 509(a)(3) supporting organization and its gross rec	ceipts are n	ormally not	more th	an \$25,00	00 A Form 990-EZ or
	_		Form 990 return is not required, but if the organization chooses to file a return, be sur	re to file a c	omplete ret	ntu		
			es 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 inste				\$	42,621.
	P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Bala	inces (Se	e the instru	ctions fo	r Part I)	
		1	Contributions, grifts, grants, and similar amounts received			<u>_</u>	1	
		2	Program service revenue including government fees and contracts				2	8,034.
		3	Membership dues and assessments			L	3	34,475.
		4	Investment income				4	112.
		5a	Gross amount from sale of assets other than inventory 5a					
		b	Less cost or other basis and sales expenses 5b					
		C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)				5c	
0 1 2010	Revenue	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from g	aming, che	eck here 🖊			
		а	Gross revenue (not including \$ of contributions	,- 5,				
			reported on line 1) 6a					
	_	ь	Less direct expenses other than fundraising expenses 6b					
		ı	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)				6c	
			Gross sales of inventory, less returns and allowances 7a					
Z		1	Less cost of goods sold 7b					
3		C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)				7c	
		l	Other revenue (describe			-	8	
			Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8			_ ·	9	42,621.
ANNEL							0	
=			- DECEIVED				11	
A	Ø	12	Salaries other compensation and employee tracefus				2	
SC	Se l	13	Professional fees and other payments to independent contractor 6 2010				3	23,835.
	xpenses	14	Professional fees and other payments to independent contractors 6 2010 Occupancy, rent, utilities, and maintenance				14	
	ம	l	Printing, publications, postage, and shipping				5	730.
		1		STATEN	MENT 1	_	6	5,060.
			Total expenses Add lines 10 through 16			_ · _	7	29,625.
			Excess or (deficit) for the year (Subtract line 17 from line 9)				8	12,996.
	ats	l .	Net assets or fund balances at beginning of year (from line 27, column (A))					
	Net Assets	i e	(must agree with end-of-year figure reported on prior year's return)				9	85,380.
,	et /		Other changes in net assets or fund balances (attach explanation)			_	10	
:	Ž		Net assets or fund balances at end of year. Combine lines 18 through 20			_	1	98,376.
1	De	ırt II	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Fi	orm 990 in	stead of For			
			(See the instructions for Part II)		eginning of		-	(B) End of year
	22	Cash	, savings, and investments	(4,7 -	85,3		22	98,376.
	23		and buildings				23	3070701
	24		r assets (describe				24	
	25		assets (nescribe		85,3		25	98,376.
	26		l liabilities (describe ►		03,3		26	75,5,0
	27		Issets or fund balances (line 27 of column (B) must agree with line 21)	—	85,3		27	98,376.
•	9321 02-0	71	LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions	<u></u>	00,0			Form 990-EZ (2009)
	UZ-01	3- iU						

MONTANA DEFENSE TRIAL LAWYERS INC

	m 990-EZ (2009) C/O RMS MANAGEMENT SERVIC			81-	<u>-04284</u>	52 Page 2
	art III Statement of Program Service Accomplishme		Part III)		. E:	penses
Wh	at is the brganization's primary exempt purpose? BUSINESS LEAGU	JE				
De	scribe what was achieved in carrying out the organization's exempt pu	rposes. In a clear and cond	ise manner, descr	ıbe		
	services provided, the number of persons benefited, and other relevan	nt information for each pro-	gram title.		for others)	
28	CONTINUING EDUCATION				1 1	
			- 			
	(Grants \$) If this amount includes foreign	grants, check here			28a	
29			· 			
		<u></u>			1	
					1	
	(Grants \$) If this amount includes foreign	grants, check here			29a	
30			. _			
			·			
	(Grants \$) If this amount includes foreign	grants, check here			30a	
31	Other program services (attach schedule)					
	(Grants \$) If this amount includes foreign	grants, check here			31a	
32	Total program service expenses (add lines 28a through 31a)			▶	32	
P	art IV List of Officers, Directors, Trustees, and Key E	mployees. List each one en	en if not compensated	(See the	instructions	or Part IV)
		(b) Tale and a	(0) 0			(=) [
	(a) Name and address	(b) Title and average hours per week devoted to	(c) Compensation (If not paid, enter			1 ' ' '
	(4) (14) (16)	position	-0)	tor others) 28a 29a 30a 31a 32 32 31a (d) Contributions to Part IV) (d) Contributions to employee (e) Expense		
RN	IS MANAGEMENT SERVICES, 36 SO LAST	EXECUTIVE DIR	ECTOR			
CF	ANCE GULCH, HELENA, MT 59601	30.00	0.	ł	0.	23,500.
	E ATTACHED	BOARD MEMBERS				
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9321	72			L		000 FZ (000)
02-0	8-10				Form	99U-EZ (2009)

En	ım	ggn-F	MONTANA DEFENSE TRIAL LAWYERS INC (Z (2009) C/O RMS MANAGEMENT SERVICES 81-04284	152		Page :
_	_	1 V	Other Information (Note the statement requirements in the instructions for Part V)	<u> </u>		. ago
٠	aı				Yes	No
33		Did th	e organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34	٠,		any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		X
35			organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not			
•			ted on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
		•	e organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting,			1
			roxy tax requirements?	35a	X	
		•	s," has it filed a tax return on Form 990-T for this year?	35b		X
36			e organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			
-			lete applicable parts of Sch. N	36		X
37		•	amount of political expenditures, direct or indirect, as described in the instructions			
-			e organization file Form 1120-POL for this year?	37b		X
38			e organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made			
			rior year and still outstanding at the end of the period covered by this return?	38a		X
			s, complete Schedule L, Part II and enter the total amount involved 38b N/A			
39)	Sectio	in 501(c)(7) organizations Enter			
	а	nıtıatı	on fees and capital contributions included on line 9			
	b	Gross	receipts, included on line 9, for public use of club facilities 39b N/A			
40	a	Sectio	in 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under			
	:	ectio	n 4911 ▶ N/A , section 4912 ▶ N/A , section 4955 ▶N/A			
	b s	Sectio	in 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the			
	3	ear o	r is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction			
	ı	as no	ot been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I	40b	N/	A
			n 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers			
	(or disc	qualified persons during the year under sections 4912, 4955, and 4958			
	đ S	Sectio	n 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the			
		-	zation N/A			
			anizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			,.
			<u> </u>	40e		<u> X</u>
41			e states with which a copy of this return is filed NONE NONE NONE NONE	1	160	
42			ganization's books are in care of \blacktriangleright RMS MANAGEMENT SERVICES Telephone no \blacktriangleright 406-443 at \blacktriangleright 36 SO LAST CHANCE GULCH, SUITE A, HELENA, MT ZIP+4 \blacktriangleright 59			
				100	<u> </u>	
		•	time during the calendar year, did the organization have an interest in or a signature or other authority	ſ	Yes	Na
			financial account in a foreign country (such as a bank account, securities account, or other financial		163	
		CCOUR	,* enter the name of the foreign country	42b		Х
			e instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
				42c	1	Х
		-	," enter the name of the foreign country	726	1	
43			n 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		•	
				I/A	-	

44

Yes No

X

Х

Form 990-EZ

completed instead of Form 990-EZ

Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of

is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be

MONTANA DEFENSE TRIAL LAWYERS INC

Form 990-EZ (2009)

C/O RMS MANAGEMENT SERVICES

81-0428452

Page 4

Par	tVI Section 501(c)(3) organizations and section 49 organizations and section 4947(a)(1) nonexempt charitable t and 51	947(a)(1) nonexempt					
46	Did the organization engage in direct or indirect political campaign activities o	n behalf of or in opposition to c	andidates for public	3		Yes	No
(office? If "Yes," complete Schedule C, Part I			<u> </u>	46		
	Did the organization engage in lobbying activities? If "Yes," complete Sche			-	47		
	s the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes,			}-	48		
	Did the organization make any transfers to an exempt non-charitable related o	rganization?		}	49a		
	f "Yes," was the related organization a section 527 organization?	a fathar than afficara directors	trustana and kay a		49b	awad .	
	Complete this table for the organization's five highest compensated employee han \$100,000 of compensation from the organization. If there is none, enter		i, trustees and key e	mpioyees/ who ea	C11 1 0 C	.aivau i	111018
	(a) Name and address of each employee paid more than \$100,000 N/A	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	ac	Expe	
51 C	otal number of other employees paid over \$100,000 complete this table for the organization's five highest compensated independe rganization. If there is none, enter "None"		ved more than \$100	,000 of compensa	tion fr	om the	· · · · · · · · · · · · · · · · · · ·
	(a) Name and address of each independent contractor paid more the second	han \$100,000	(b) Type of se	rvice (c)	Com	pensat	ion
d T	otal number of other independent contractors each receiving over \$100,000	7	>				
Sign Here	Under penalties of perjury, I deglare that I raile estamined this return, including according and compare peclaration of preparer (priner than officer) is passed on all information of officer Significant of officer Type or print name and title	ormation of which preparer has any i	is an to the best of management with the best of the b	Date Detail	el, vris i	9/0	
Pald Prepar Use On	Firm's name (or yours JUNKERMIER, CLARK, CAMPAN	4.29.10 emp	ck if self- loyed P EIN I	erer's identifying nur	nber (S	ee instr)
	of setf-employed). address, and ZIP+4 P.O. BOX 1164 HELENA, MONTANA 59624		Phon		447	2-69	901
May the	RECEIVE, MONTAINE 39024	··· ·- ·		<u> </u>	7 Yes		No
y till	Sissass and lottern was the property shown above. One mathetions			Fo		0-EZ (

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2009

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

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

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Name of organization	MONTANA	DEFENSE TRIAL I	LAWYERS INC	c) or is a section 527 or es in Part IV. s in Part IV. c)(3). c), except section 501 (conction activities resection 527 DL, political organizations to which Also enter the amount of politic separate segregated fund or a (d) Amount paid from	nployer identification number		
	C/O RMS	MANAGEMENT SERV	Action is exempt under section 501(c) or is a section 527 organized and indirect political campaign activities in Part IV. Sation is exempt under section 501(c)(3).	81-0428452			
Part I-A Comp	lete if the org	anization is exempt un	der section 501(c) or is a section 527	organization.		
2 Political expenditi	•	·		•	* \$		
3 Volunteer hours							
[incomment of the control of the con							
				<u>)(3). </u>			
	•	•			\$		
	•	, ,		55	· 		
		n 4955 tax, did it file Form 4720) for this year?		Yes No		
4a Was a correction					Yes No		
b If 'Yes,' describe	in Part IV.	onization is everyt un	dor coation 501/a	A execut section 50	11(c)(3)		
	• •		· ·	-	*		
		ization's funds contributed to o	ther organizations for	section 527			
exempt function a					* *		
•	tion expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-PO	_	. •		
line 17b					Yes No		
		•					
		, provide information in Part IV.		oparato sogregatos tarra t	or a political abilion committee		
(a) Nan	•	· · · · · · · · · · · · · · · · · · ·		(d) Amount paid from	n (e) Amount of political		
(a) Ivali	10	(b) Address	(C) Lift	, , ,			
					g promptly and directly		
					delivered to a separate political organization.		
					If none, enter -0		
		· · · · · · · · · · · · · · · · · · ·					

LHA

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

MONTANA DEFENSE TRIAL LAWYERS INC

Sche	edule C (Form 990 or 990-EZ) 2009	C/O RMS	MANAGEMENT SI	ERVICES	81-0	0428452 Page 2
Pa			exempt under section	on 501(c)(3) and fil	ed Form 5768	
	(election under sec	tion 501(h)).				
	heck 🚩 🔛 if the filing organiza	ition belongs to	an affiliated group.			
BC	heck Lifthe filing organiza	ition checked bo	ox A and "limited control" pr	ovisions apply.		T
		ts on Lobbying ditures" means	Expenditures amounts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to infl	uence public op	inion (grass roots lobbying)			
b	Total lobbying expenditures to infl	uence a legislati	ve body (direct lobbying)			
c	Total lobbying expenditures (add i	ines 1a and 1b)				
d	Other exempt purpose expenditur	es				
е	Total exempt purpose expenditure	s (add lines 1c	and 1d)	1		
f	Lobbying nontaxable amount Ent	er the amount fr	om the following table in bo	th columns.		
	If the amount on line 1e, column (a) (or (b) is: Ti	he lobbying nontaxable an	nount is:		
	Not over \$500,000	20	0% of the amount on line 16)		
	Over \$500,000 but not over \$1,00	0,000 \$	100,000 plus 15% of the ex	cess over \$500,000.		
	Over \$1,000,000 but not over \$1,5	\$00,000	175,000 plus 10% of the ex	cess over \$1,000,000		
	Over \$1,500,000 but not over \$17	,000,000 \$	225,000 plus 5% of the exc	ess over \$1,500,000.		
	Over \$17,000,000	\$	1,000,000.			
9	•		•			
h	•					-
	Subtract line 1f from line 1c. If zero	•		4700		<u> </u>
J	If there is an amount other than ze reporting section 4911 tax for this		in or line 11, did the organiz	tation file Form 4/20		Yes No
	reporting section 4511 (ax for this		ar Averaging Period Under	r Section 501/h)		165 140
	•	ations that ma	de a section 501(h) elections see the instructions for line	n do not have to comp		
		Lobbying	Expenditures During 4-Ye	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
	Lobbying nontaxable amount					
Ь	Lobbying ceiling amount					
	(150% of line 2a, column(e))			<u> </u>		
	T-1-11-1-1					
<u>C</u>	Total lobbying expenditures					
-4	Grassroots nontaxable amount					
	Grassroots ceiling amount					
•	(150% of line 2d, column (e))					
	(
f	Grassroots lobbying expenditures		1			

Schedule C (Form 990 or 990-EZ) 2009 C/O RMS MANAGEMENT SERVICES 81-042845

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

		(a)	(t	o)
		Yes	No	Amo	
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
Я	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
i	Total. Add lines 1c through 1i				
•	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	[,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	(5), or se	ction	
	301(0)(0).			Yes	No
	Mars substantially all (00% or mars) duos recoved anadodustible by members?		1		X
1	Were substantially all (90% or more) dues received nondeductible by members?		2		<u>x</u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)	(5) or so	ction	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."			nswered	
1	Dues, assessments and similar amounts from members		1	34	475.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	1:	<u>3,445.</u>
þ	Carryover from last year		2b		
C	Total		2c		3,445.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	13	3,445.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	Supplemental Information		·		
•	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a y additional information.	no Part II-6,	ine II Also	, complete	this part

FORM 990-EZ	OTHER EXPENSES	STATEMENT 1
DESCRIPTION		AMOUNT
LEGISLATIVE EXPENSES BANK CHARGES & CREDIT CARD FET BOARD CONFERENCE CALLS WEB SITE FEES SUBSCRIPTIONS TELEPHONE	ES	2,089. 728. 350. 1,233. 46. 614.
TOTAL TO FORM 990-EZ, LINE 16		5,060.

FOI	RM 990∸EZ	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		S	TATE	MENT	2
A)	DIRECTLY OF	ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL TRACT?	[]	YES	[X]	NO
B)		ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	[J	YES	[X]	NO

MONTANA DEFENSE TRIAL LAWYERS, INC.

Names and Addresses of Officers

President
Steven W. Reida
Landoe, Brown, Planalp,
Braaksma & Reida, P C
27 North Tracy
Bozeman, MT 59715

Vice President
John L. Alke
Hughes, Kellner, Sullivan & Alke
P.O. Box 1166
Helena, MT 59624

Secretary-Treasurer
Jean Faure
Faure & Holden, PC
P O. Box 2466
Great Falls. MT 59403

Other Past President
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