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Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)**2012**  
Open to Public  
Inspection

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

<b>A For the 2012 calendar year, or tax year beginning</b>		July 1	<b>, 2012, and ending</b>	June 30	<b>, 2013</b>
<b>B Check if applicable:</b>		<b>C Name of organization</b>		<b>D Employer identification number</b>	
<input type="checkbox"/> Address change		Western States Right To Work		81-0370551	
<input checked="" type="checkbox"/> Name change		Doing Business As also dba Montana Citizens for Right to Work, Inc.		E Telephone number	
<input type="checkbox"/> Initial return		Number and street (or P.O. box if mail is not delivered to street address)		703-945-7776	
<input type="checkbox"/> Terminated		Room/suite			
<input type="checkbox"/> Amended return		City, town or post office, state, and ZIP code			
<input type="checkbox"/> Application pending		Helena, MT 59624		G Gross receipts \$ 720,047	
		F Name and address of principal officer: Gregory Hagenston 104 Parkview Drive, Glendive, MT 59330		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				If "No," attach a list. (see instructions)	
<b>I Tax-exempt status:</b>		<input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(4) (Insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(c) Group exemption number</b> ►	
<b>J Website:</b> ►					
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		<b>L Year of formation:</b> 1977		<b>M State of legal domicile:</b> MT	

**Part I Summary**

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities: Public policy awareness, education and lobbying		
<b>Revenue</b>	2 Check this box ► <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a) . . . . .	3	0
<b>Expenses</b>	4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4	0
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . . .	5	0
<b>Net Assets or Fund Balances</b>	6 Total number of volunteers (estimate if necessary) . . . . .	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	7a	0
	b Net unrelated business taxable income from Form 990-T, line 34 . . . . .	7b	0
	8 Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year	Current Year
		140,046	720,047
	9 Program service revenue (Part VIII, line 2g) . . . . .		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .		
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	140,046	720,047
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .	6,147	123,690
	14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) . . . . .	35,586	55,375
	16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		
	b Total fundraising expenses (Part IX, column (D), line 25) ► . . . . .		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	94,542	524,894
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) . . . . .	136,275	703,959
	19 Revenue less expenses. Subtract line 18 from line 12 . . . . .	3,771	16,088
	Beginning of Current Year	End of Year	
		5,380	21,468
	20 Total assets (Part X, line 16) . . . . .	5,380	21,468
	21 Total liabilities (Part X, line 26) . . . . .	0	0
	22 Net assets or fund balances. Subtract line 21 from line 20 . . . . .	5,380	21,468

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	<i>John A. Kals</i>	9/27/13			
	Signature of officer	Date			
	John A. KALS, TREASURER				
	Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN
	Barry Bradshaw	<i>Barry C Bradshaw</i>	9/27/13		
	Firm's name ►		Firm's EIN ►		
	Firm's address ►		Phone no	703-945-7776	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Paperwork Reduction Act Notice, see the separate Instructions.

Cat. No. 11282Y

Form 990 (2012)