

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Form 990

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

OMB No 1545-0047

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

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.

2013

Department of the Treasury

Open to Public Inspection

A	For the 2		dar year, o	r tax v	ear begi	nnina		. 20	13, and endi	na			<u> </u>			
<del>^</del> B	Check if app		C	y		9		, _0	, and end	5	D Emi	oloyer Ideni	tification Num	ber		
-		s change	Montana	a ("O	nserva	ation Vot	ers In	С.			_ I	-0521				
	Name c	•	PO Box			2011 101	.010 111	··				phone num				
	Initial re	-	Billing		MT 591	L03					1 (2	106) 2	54-1593	3		
	Termina															
		ed return									G Gro	ss receipts	\$ 2	272,532.		
	$\vdash$	tion pending	F Name an	d addres	s of princip	al officer				H(a) is th	us a group r			Yes X No		
		aon ponding	Same A							H(b) Are	all subordin	ates include	ed?	Yes No		
1	Tax-exem	ot status	501(c)(3)		501(c) (	<b>4</b> ) <b>◄</b> (1	nsert no.)	4947(a)(1	) or   527	- If 'N	lo,' attach a	list. (see in:	structions)			
j	Website	<del></del>	w.mtvot			<u>4</u> / (		1.1 10 17 (0)(1)	7 0	H(c) Grou	up exemptio	n number 1	8290	1		
ĸ		rganization	X Corporati		Trust	Association	Other >		L Year of forma		<del> </del>	_	legal domicile			
		Summar					• • • • • • • • • • • • • • • • • • • •				<u> </u>					
	1 Brie	efly descri	be the orga	nızatı	on's miss	sion or most :	significant	activities:	To educa	ate ar	nd act	ivate	voters	to be		
a	l	tal an	d effec	tive	e part	<u>icipants</u>	in Mor	ntana's	democra	tic pr	cocess	, to r	protect	air		
Activities & Governance	an					c health										
Ĕ														<b>-</b>		
8	2 Che					on discontinu			isposed of m	ore than	25% of 1	-	sets.			
প্ৰ	3 Nur 4 Nur					erning body (for rs of the gove			ina 1h)			3		13		
S	E Tot		•	•		ıs or the gove ın calendar ye	• .		•			. 4		13		
₹	6 Tot					f necessary)		art v, into	20) .	•		. 6		<u>40</u> 317		
귷	7a Tot					Part VIII, col	lumn (C), l	ine 12 .				7 a		0.		
_	1					from Form 9			•			7 b		0.		
_											Prior Ye	ar	Curre	ent Year		
•	8 Contributions and grants (Part VIII, line 1h)									383	,075.	:	255,129.			
Ž			revenu									267.		180.		
Revenue						(A), lines 3, 4						387.		374.		
Œ						ines 5, 6d, 8d						<u>,012.</u>		11,698.		
						1 (must equa			), line 12)		391	,741.		<u> 267,381.</u>		
						IX, column (		-3)	• • • • • • • • • • • • •							
						IX, column (A		(0) 1	F 10)		170	F10		105 240		
S	15 Sal					e benefits (È			nes 5-10)		1/0	<u>,513.</u>		185,349.		
Expenses	16a Pro		sional fundraising fees (Part IX, column (A), line 11e) //										<u></u>			
Š	<b>b</b> Tot				~ ~	/	-		50,240.	<u>.</u>						
ш	17 Otr					lines l'la l'id			•		167	<i>,</i> 710.		98,846.		
	l .	•			•	t equal Part II	- 11	(A), line 25	<b>(</b> )		338	,223.		284,195.		
		venue less	expenses	. Subti	ract line	18 from line	12/				53	,518.		-16,814.		
8							-			Begin	ning of Cu			of Year		
Assets d Beleny	<b>20</b> Tot		(Part X, Im				•	•		-		,360.		136,232.		
ž	il		es (Part X,		•						3	,449.		1,135.		
	722	t assets o	fund balai	nces S	Subtract	line 21 from	line 20.	:	•	<u>.                                    </u>	151	<u>,911.</u>		135,097.		
			<u>re Block</u>													
Und	ler penalties o	of perjury, I d	eclare that I ha	ve exam	nined this re	eturn, including ac n all information o	companying s	schedules and s	statements, and to	o the best o	f my knowle	dge and be	lief, it is true,	correct, and		
		1	2	-	$\overline{\Lambda}$	1/					<del>,//√</del>	01 1	1/0	$\rightarrow \Omega \wedge$		
٥:		Signati	re-of-officer/	0 mil	<del>)//</del> k	J.P.	AID	111 -			Bate	μy	(-1)	<u> </u>		
21	gn ere	\ <u></u>	_,,,	~~~		$\sim 7^{-1}$				Essa	/					
116	:1 <b>C</b>		resa Ke		<u>ıy</u>			-()		Exe	cutive	e p <b>y</b> re	ctor			
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	-										11/00:10	•	Yes			
ЬΑ	w rorra	perwork i	teauction /	4CT NO	uce, see	the separate	: instructio	JNS.	TI	EEA0113L	11/08/13		<b>→</b> ori	m <b>990</b> (2013)		

Form <b>990</b> (2013) Montana Conse	rvation Voters Inc.	81-0	521030	Page 2
PartIII Statement of Program	•			
	ns a response or note to any line in this Part III		•	X
1 Briefly describe the organization's i	mission.			
See_Schedule_O				
			<del>-</del> -	<b>-</b>
2 Did the organization undertake any si	gnificant program services during the year which were not listed on the	e prior		
Form 990 or 990-EZ?.			Yes	X No
If 'Yes,' describe these new service	es on Schedule O.			
3 Did the organization cease conduct	ting, 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 prograr Section 501(c)(3) and 501(c)(4) organ others, the total expenses, and rev	m service accomplishments for each of its three largest program s nizations and section 4947(a)(1) trusts are required to report the amoun renue, if any, for each program service reported.	ervices, as interpretation of grants a	measured by nd allocations	expenses. to
4a (Code:) (Expenses \$	112,251. including grants of \$	) (Revenue	\$	)
See Schedule O		. <del>_</del>	<b></b>	
				- <b></b>
			- <b></b>	<b></b>
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4b (Code: ) (Expenses \$	62,643. including grants of \$	) (Revenue	\$	)
See_Schedule_O	02, 043. molading grants of 4	, (1.0101.00	<b>-</b>	
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			<b></b> -	
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4c (Code) (Expenses \$	44,847. including grants of \$	) (Revenue	\$	)
<u>See_Schedule_O</u>		<b></b>		
				_ <b></b>
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4 d Other program services. (Describe	in Schedule O.)			
(Expenses \$	including grants of \$ ) (Revenue	\$		)
4 e Total program service expenses	<b>►</b> 219,741.			
BAA	TEEA0102L 07/02/13		Fo	rm <b>990</b> (2013)

			tes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		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 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	, <del></del>		
ā	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
•	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
(	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
(	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.	11 f		х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		x
ı	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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
1	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		<u>x</u>
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	<u> </u>

Form 990 (2013) Montana Conservation Voters Inc.

Partive Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations 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		x
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? <i>If 'Yes,' complete Schedule J</i>	23		x
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		х
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		Х
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 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		<u>x</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	o 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		х
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	X	
3AA		Form	1 <b>990</b> (	(2013)

### Form 990 (2013) Montana Conservation Voters Inc. 81-0521030 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 . . . . 1 a 1 b **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . 0 X 1 c 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 ..... 40 $\overline{X}$ b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a Х **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 Accounts. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions Х 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were Х not tax deductible? 6 b . . . 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 h c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 7h 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 a **b** Did the organization make a distribution to a donor, donor advisor, or related person? ......... 9 h 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders... 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13 a 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 organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand ... 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14 a X

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

Par		ow, a	and f	or
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan Schedule O. See instructions.	jes i	П	_
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
1.	Enter the number of voting members of the government had at the end of the tay year.		Yes	No
ıa	Enter the number of voting members of the governing body at the end of the tax year  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.	ĺ		
Ь	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	71	X
	Did the organization have members or stockholders?	6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more			
	members of the governing body?	7 a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8 a	Х	
b	Each committee with authority to act on behalf of the governing body?	8 b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venu	ie Co	de.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Х	<u> </u>
Ь	olf 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 ь	Х	
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	<u> </u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O	L		لـــــا
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	_X_	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12c	Х	
	Did the organization have a written whistleblower policy? .	13	Х	
	Did the organization have a written document retention and destruction policy?	14	Х	ļ
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official See Schedule 0	15 a	X	
b	Other officers of key employees of the organization See. Schedule 0 .	15Ь	Х	<del>                                     </del>
16 a	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?.	16 a		X
	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
	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-T (501(c)(3)s only) as inspection. Indicate how you make these available. Check all that apply.	⁄aılabl	e for p	public
	Own website Another's website X Upon request Other (explain in Schedule 0)			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year.  See Schedule O	able to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:			
BAA	Theresa Keaveny 3318 3rd Avenue N. #208 Billings MT 59101 (406) 254-1593 TEEA0106L 07/02/13	Form	990	(2013)

Form <b>990</b> (2013)		81-0521030	Page 7
Part VIII Con Inde	mpensation of Officers, Directors, Trustees, Key Employees, High ependent Contractors	est Compensated Employees	and
Chec	ck 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

- 1 a 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.

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

		(C)								
(A) Name and Title	(B) Average hours per week (list	one bo	er an	less p	oerso	more to n is bot or/truste	h an	(D)  Reportable compensation from	(E)  Reportable  compensation from	Estimated amount of other
	week (ist any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Nancy Mattheson	2									
Director	0	Х						0.	0.	0.
(2) Ben Graybill	3	ļ								
Director	0	X						0.	0.	0.
_(3) Robin Saha	2							_		
Director	0	X			_		-	0.	0.	0.
_(4)_Rich_Day	2	١								
Director	0	X						0.	0.	0.
_(5) Rachel Carroll Rivas	2	١.,								,
Director	0	X	$\vdash$	_			₩	0.	0.	0.
(6)_Michelle_Stearns	2	٠,					ł			0
Director (7) Katherine Scherfig	2	X	H				<b>-</b>	0.	0.	0.
Director		х						0.	0.	0.
(8) Addison Sessions	2	<u> </u>					<del>  -</del>			
Director	- <del>-</del>	х						0.	٥.	0.
(9) Dan Short	2	<u> </u>	$\vdash$				<u> </u>			<del></del>
Director	15	x						0.	ο.	0.
(10) Juanita Vero	5									
Chairman	0	İ		Х	l			0.	o.	0.
(11) Ryan Busse	5						İ			-
Vice Chairman	0	Ī		Х				0.	0.	0.
(12) Elizabeth Ametsbichler	2									
Secretary	0			X				0.	0.	0.
(13) Chantel Scheiffer	22									
Treasurer	0		<u> </u>	X				0.	0.	0.
(14) Theresa Keaveny	40_	1								
Executive Director	0				X	L		62,400.	0.	0.

Page 8

Part VII   Section A. Officers, Directors, Trus	tees, l	<u> </u>	Em	plo	ye	es, a	anc	Highest Com	pensated Empl	oyees (continued)
(A) Name and title	(B) Average hours per	box	, unte: cer an	ss pe	more more erson direct	than on the than of the than the the than the the than the the than the the the the the the than the the the the the the the the the the	tee)	(D)  Reportable compensation from	<b>(E)</b> Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)										
(16)										
(17)										
(18)					ļ					
<u>(19)</u>										
(20)										
(21)										
(22)										
(23)									,	
(24)										
(25)								-		
1 b Sub-total							<b>&gt;</b>	62,400.	0.	0.
c Total from continuation sheets to Part VII, Section	1 A .						_	0.	0.	0.
d Total (add lines 1b and 1c).  2 Total number of individuals (including but not limited t from the organization ▶ 0	o those I		abov			recei	ved	62,400. more than \$100,00	0. O of reportable comp	0. pensation
									<del></del>	Yes No
3 Did the organization list any former officer, directs on line 1a? If 'Yes,' complete Schedule J for such			key	em	plo	yee, (	or h	ighest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of r the organization and related organizations greater such individual	eportabl than \$1	e coi 50,00	mpe 00?	nsa /f '\	tion 'es'	and com	othe plet	er compensation f e Schedule J for	rom	. 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,	compen comple	satio	n fro	om a lule	any <i>J fo</i>	unrel r suc	late th po	d organization or erson	ındıvıdual	5 X
Section B. Independent Contractors									•	
Complete this table for your five highest compensation from the organization. Report compens.	ation for	the c	dent alen	cor dar	ntrac year	endi	thai ng v	vith or within the or	ganızatıon's tax year	**
(A) Name and business addre	ess							Description (		(C) Compensation
										· · · · · · · · · · · · · · · · · ·
2 Total number of independent contractors (including bu		ıted t	o the	ose I	liste	d abo	ve)	who received more	than	
\$100,000 of compensation from the organization		TEEA	0108L	. 11/	11/13					Form <b>990</b> (2013)

rai		Check if Schedule O contr		oonse or note to any	line in this Part VII			🗆
		-			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2 2	1 a	Federated campaigns.	1a					
A S		Membership dues	1 b	83,170.				
S.G.		Fundraising events.	1 c	12,022.				
FH		Related organizations.	1 d					
NS,	е	Government grants (contributions)	1 e					
SIBUTIO THER		All other contributions, gifts, grants similar amounts not included above		159,937.				
E S	_	Noncash contributions included in li	nes 1a-1f. Ş					
<u> </u>	h	Total. Add lines 1a-1f		Business Code	255,129.			
훏	2 2	Databasa Bantal			180.	180.		
짍	Z a b	<u>Database Rental</u>		900099	160.	160.		
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	c							
	d							
S	е							
8	f	All other program service re	venue.					
욅	g	Total. Add lines 2a-2f .		. •	180.			
	3	Investment income (includir	ig dividenc	ls, interest and				
		other similar amounts)	•		374.		_	374.
	4	Income from investment of	tax-exemp	t bond proceeds				· <u>-</u>
	5	Royalties		>				
	c -	Cross rants	(i) Real	(II) Personal				
		Gross rents Less: rental expenses		<u> </u>				
1		Rental income or (loss)						
		Net rental income or (loss)						
		· <del> /</del>	i) Securities	► (ii) Other				
	7 a	Gross amount from sales of assets other than inventory.	,	(1) = 1111				
		·						
	D	Less, cost or other basis and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)		. •				
	8 a	Gross income from fundrais	ına events					
EVENUE	-	(not including \$	•					
E		of contributions reported on	line 1c)					
ER H		See Part IV, line 18		a 16,849.				
OTHER RE	l	Less: direct expenses		b 5,151.				
•		: Net income or (loss) from fi		events	11,698.			
	9 a	Gross income from gaming See Part IV, line 19	activities.	а				
		Less. direct expenses		b				
	С	: Net income or (loss) from g	amıng actı	vities •				
	10 a	Gross sales of inventory, le	ss returns					
		and allowances		a				
		Less: cost of goods sold : Net income or (loss) from s	aloc of inv	b				
		Miscellaneous Revenue	ales of file	Business Code				
	11 a	·			<del></del>	-		<del>                                     </del>
	h	·		-				_
	ء	·;		·				<del> </del>
	ď	All other revenue						<del>                                     </del>
		Total. Add lines 11a-11d		•				
		Total revenue. See instruct	ions		267,381.	180.	0.	374.

Check if Schedule O contains a response or note to any line in this Part IX									
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses				
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21								
2	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								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	26,043.	15,248.	2,306.	8,489.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.				
7	Other salaries and wages	128,842.	107,956.	3,238.	17,648.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	3,715.	2,853.	191.	671.				
9	Other employee benefits	11,595.	9,212.	331.	2,052.				
10	Payroll taxes .	15,154.	12,207.	504.	2,443.				
11	Fees for services (non-employees).								
ā	Management								
ŧ	Legal .				*********				
C	: Accounting.								
C	Lobbying				· •				
•	Professional fundraising services. See Part IV, line 17								
f	Investment management fees								
	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	19,642.	14,809.	600.	4,233.				
	Advertising and promotion Office expenses	307.	83.	124.	100.				
13		893.	817.	004	76.				
14	Information technology	5,483.	3,764.	804.	915.				
15	Royalties	0.246			1 600				
16	Occupancy Travel	9,346.	7,073.	665.	1,608.				
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	11,232.	9,695.	545.	992.				
19	Conferences, conventions, and meetings	10,098.	8,070.	382.	1,646.				
20	Interest		·						
21	Payments to affiliates								
22	Depreciation, depletion, and amortization								
	Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses	1,078.	725.	47.	306.				
	of line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
á	Grants to Others	17,500.	15,000.	1,250.	1,250.				
	Printing and Publications	8,335.	4,590.	103.	3,642.				
	Postage and Shipping	5,268.	3,020.		2,248.				
	Dues/Registrations	3,732.	3,130.	491.	111.				
•	All other expenses	5,932.	1,489.	2,633.	1,810.				
25	Total functional expenses. Add lines 1 through 24e	284,195.	219,741.	14,214.	50,240.				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720)								
DAA					F 000 (2012)				

		Check if Schedule O contains a response or note to a	any line in this Part X .			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		8,929.	1	9,004.
	2	Savings and temporary cash investments	[	145,830.	2	126,348.
	3	Pledges and grants receivable, net	[		3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated em Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified per section 4958(f)(1)), persons described in section 4958(o)(3) employers and sponsoring organizations of section 501(c)(5) beneficiary organizations (see instructions). Complete f	9) voluntary employees'  -		6	
Ą	7	Notes and loans receivable, net	1		7	<del></del>
ASSETS	8	Inventories for sale or use	<u> </u>		8	
Ţ	9	Prepaid expenses and deferred charges	·		9	<del></del>
•	10a	Land, buildings, and equipment: cost or other basis.	10a 7.535			
	h		10a 7,535. 10b 7,535.		10 c	
	11	Investments – publicly traded securities	7,535.		11	<u> </u>
	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	601.	15	880.	
	16	Total assets. Add lines 1 through 15 (must equal line 3	4)	155,360.	16	136,232.
•	17	Accounts payable and accrued expenses .	<del>"</del>	133,300.	17	130,232.
	18	Grants payable			18	
	19	Deferred revenue .	Ţ.	· · · · · · · · · · · · · · · · · · ·	19	
L	20	Tax-exempt bond liabilities	Ī		20	
Ā	21	Escrow or custodial account liability. Complete Part IV			21	
<b>レーベBーレーケービの</b>	22	Loans and other payables to current and former officers key employees, highest compensated employees, and complete Part II of Schedule L	s, directors, trustees, disqualified persons.		22	
į	23	Secured mortgages and notes payable to unrelated thir	L		23	
S	24	Unsecured notes and loans payable to unrelated third p	· L		24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24). Complete	to related third parties, lete Part X of Schedule D	3,449.	25	1,135.
	26	Total liabilities. Add lines 17 through 25 .		3,449.	26	1,135.
NET		Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.	e ► X and complete			
<b>∠</b> WHEN	27	Unrestricted net assets.	<b> </b> -	151,911.	27	135,097.
Ĕ	28	Temporarily restricted net assets.			28	100,057.
	29	Permanently restricted net assets	t		29	
R F.		Organizations that do not follow SFAS 117 (ASC 958), che and complete lines 30 through 34.	eck here >			
F 020	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipme	ent fund .	-	31	
Ļ	32	Retained earnings, endowment, accumulated income, of	L		32	· · · · · · · · · · · · · · · · · · ·
日本 しんまいしゅ	33	Total net assets or fund balances	†	151,911.	33	135,097.
É	34	Total liabilities and net assets/fund balances.		155,360.	34	136,232.
ВА	A		L		<u> </u>	Form <b>990</b> (2013)

FUII	1990 (2013) Montana Conservation voters inc.	81-0	1271030			ige iz
Pa	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	_				$\Box$
1	Total revenue (must equal Part VIII, column (A), line 12)		1	2	67,3	381.
2	Total expenses (must equal Part IX, column (A), line 25)	. [	2	2	84,1	95.
3	Revenue less expenses. Subtract line 2 from line 1	. [	3		16,8	314.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4		51,9	
5	Net unrealized gains (losses) on investments		5			
6	Donated services and use of facilities		6			
7	Investment expenses		7			
8	Prior period adjustments	L	8			
9	Other changes in net assets or fund balances (explain in Schedule O) .	L	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		10		25 6	
Da	column (B)) rt XII   Financial Statements and Reporting	•••	10	<u> </u>	35,0	<u> 197.</u>
Га	<del></del>					_
	Check if Schedule O contains a response or note to any line in this Part XII.					Ц
					Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or re separate basis, consolidated basis, or both	eviewed	on a			
	Separate basis Consolidated basis Both consolidated and separate basis					
- 1	Were the organization's financial statements audited by an independent accountant?			2ь		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s	separate	9			
	basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis					
				<u> </u>		ļJ
1	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	-		2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.				-	4-
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	ıngle		3 a		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the requii	ed audi	t			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 ь		
BAA	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			Form	990	(2013)

## SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

81-0521030 Montana Conservation Voters Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year). . . 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2 h c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . . . No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ►\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X . . ► S 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: ▶\$ a Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X

Schedule D (Form 990) 2013 Monta Part III Organizations Maintai	na Conse ining Collec	rvations (	on Voters of Art, Histo	Inc.	Treasures, o	or Ot	81-0521 her Similar Asse	1030 e <b>ts</b> <i>(contir</i>	Page 2 nued)
3 Using the organization's acquisition items (check all that apply)	, accession, ar	nd other re	ecords, check a	ny of th	ne following that	are a	significant use of its o	collection	
a Public exhibition			d 🔲 Loan	or excl	nange programs	s			
<b>b</b> Scholarly research			e 🗌 Other			_			
c Preservation for future gener									
4 Provide a description of the organiz Part XIII.									
5 During the year, did the organizato be sold to raise funds rather th	tion solicit or i nan to be mair	receive d ntained a	lonations of art s part of the o	t, histo raaniza	rical treasures, ation's collection	, or oth in?	ner similar assets	Yes	□No
Part IV Escrow and Custodia line 9, or reported an	l Arrangem	ents. C	omplete if t	he or	ganization a		ered 'Yes' to For	m 990, Pa	irt ÍV,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodiar	n, or othe	er intermediary	for co	ntributions or o	ther a	ssets not included	Yes	No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIII ar	nd compl	ete the follows	ng tabl	е	_		<b>_</b>	
						-		Amount	
c Beginning balance					• • • • • • • • • • • • • • • • • • • •		1 c		
d Additions during the year					•		1 d		
e Distributions during the year	•		•			•	1 e		
f Ending balance		000 5	N- 1 V 1 013	1		٠ [	1f	1	
2a Did the organization include an a							\	Yes	⊢ No
<b>b</b> If 'Yes,' explain the arrangement	III Part Alli. C	neck nei	e ir the explai	ition na	as been provide	ea in F	rart XIII	•	
Part V Endowment Funds. C	omplete if t	he ora	anization ar	swer	ed 'Yes' to F	orm	990 Part IV line	<u> </u>	
Tare a land miletter and a	(a) Current		(b) Prior yea	$\overline{}$	(c) Two years be		(d) Three years back	(e) Four ve	ears back
<b>1 a</b> Beginning of year balance	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				(-) )		(.,, .,,,	(4)	
<b>b</b> Contributions	<del>-</del>		-						
c Net investment earnings, gains, and losses									
d Grants or scholarships									
Other expenditures for facilities and programs	· · · · · · · · · · · · · · · · · · ·								
f Administrative expenses			<u> </u>						
<b>g</b> End of year balance							·		
2 Provide the estimated percentage	e of the currer	nt year e	nd balance (lin	e 1g, d	column (a)) held	d as:	·	<u> </u>	
a Board designated or quasi-endowm		•	ક `	٥,					
<b>b</b> Permanent endowment ►	<del>-</del> 8								
c Temporarily restricted endowmer	nt ►		8						
The percentages in lines 2a, 2b,	and 2c should	equal 1	00%.						
3a Are there endowment funds not in t	the possession	of the org	ganization that a	are held	d and administer	red for	the	Yes	No
organization by (i) unrelated organizations								3a(i)	110
(ii) related organizations.					•			3a(ii)	+
<b>b</b> If 'Yes' to 3a(ii), are the related of	organizations I	isted as	required on Sc	hadula	. R?	•		3b	+
4 Describe in Part XIII the intended	U		•			•			
Part VI Land, Buildings, and							<u> </u>		
Complete if the organi			Yes' to Forn	n 990	. Part IV. Im	ne 11	a. See Form 990	). Part X. I	line 10.
Description of property		(a) Cost	or other basis estment)	(b)	Cost or other		(c) Accumulated depreciation	(d) Book	
1 a Land.			<u> </u>			1			
<b>b</b> Buildings .	İ	_	-						
c Leasehold improvements		_					_		
<b>d</b> Equipment	ļ						7,535.		7,535.
<b>e</b> Other					7,535				7,535.
Total. Add lines 1a through 1e. (Colum	nn (d) must eq	ual Forn	990, Part X,	columr					0.
BAA			- · · · · ·		<u> </u>		Schedu	ıle <b>D</b> (Form 9	

Schedule <b>D</b> (Form 990) 2013 Montana Conservati	on Voters Inc.		0521030 Page <b>3</b>
Part VII Investments - Other Securities.	L'Vas' ta Earm 000	N/A	rm 000 Port V line 10
Complete if the organization answered  (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost of	
(1) Financial derivatives	(b) Book value	(C) Method of Valuation. Cost of	
(2) Closely-held equity interests			
(3) Other			
(A)			
<u>`</u> (B)			···
(C)			
(D)			
(D) (E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)  Part VIII   Investments — Program Related.		NI / 7	<del></del>
Complete if the organization answered	I 'Yes' to Form 990	N/A , Part IV, line 11c. See Foi	rm 990, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost of	
(1)			-
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8) (9)	_		
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX Other Assets.	N/A		
Complete if the organization answered		, Part IV, line 11d. See Fo	rm 990, Part X, line 15.  (b) Book value
(1)	scription		(b) book value
(2)			
(3)			
(4)			
(5)			
(6)			
<del>(7)</del> <del>(8)</del>	<del></del> .		
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (column	B), line 15.)		•
Part X Other Liabilities.	000 0	116 0 5 000 0 144	0.5
Complete if the organization answered 'Yes' to Fi	orm 990, Part IV, line 11 (b) Book value	e or 11f. See Form 990, Part X, III	ne 25
(1) Federal income taxes	(b) Book value	<del> </del>	
(2) Credit Card	1,13	35.	
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)		<del> </del>	
(10)	-		
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	► 1,13		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo			_
tax positions under FIN 48 (ASC 740). Check here if the text of the footnote	has been provided in Part XIII	L	📙

Schedule D (Form 990) 2013 Montana Conservation Voters Inc.		81-0521030 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statemen		Return. N/A
Complete if the organization answered 'Yes' to Form 990, P.	art IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		到 <b>支</b> の性 な 無い
a Net unrealized gains on investments	2 a	
<b>b</b> Donated services and use of facilities	2 b	
c Recoveries of prior year grants	2 c	
d Other (Describe in Part XIII.)	2 d	
<b>e</b> Add lines <b>2a</b> through <b>2d</b>		2e
3 Subtract line 2e from line 1		. 3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
<b>b</b> Other (Describe in Part XIII.).	4 b	
c Add lines 4a and 4b		4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Part:XII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses p	er Return. N/A
Complete if the organization answered 'Yes' to Form 990, P	art IV, line 12a.	
Total expenses and losses per audited financial statements .		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		7 X2
a Donated services and use of facilities .	2 a	120 - 100 -
<b>b</b> Prior year adjustments	2 b	
<b>c</b> Other losses	2c	
d Other (Describe in Part XIII )	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		<b>A E E E E E E E E E E</b>
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
<b>b</b> Other (Describe in Part XIII.)	4 b	
c Add lines 4a and 4b		4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	· .	5
Part XIII   Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also com	Part IV, lines Ib and 2b, Inplete this part to provide	Part V, any additional information.
		<b>-</b>
BAA		Schedule <b>D</b> (Form 990) 2013

# SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

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

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service	► Information ab	out Schedule at w	G (Form 9 ww.irs.gov	90 or 990-EZ) and its i /form990.	nstructions is	Inspection
Name of the organization	<del></del>			1	Employer identific	
Montana Conservat					81-052103	80
	vities. Complete if the or rs are not required to co			es' to Form 990, Part	IV, line 17.	
1 Indicate whether the o	rganization raised funds	through any			: : <del>-</del>	
a Mail solicitations			е		government grants	
<b>b</b> Internet and emai			f	Solicitation of gove		
c Phone solicitation			g	X Special fundraising	g events	
d In-person solicitat						
2a Did the organization had employees listed in Fo	ve a written or oral agreer orm 990, Part VII) or ent	nent with any city in connec	individual (i tion with pr	ncluding officers, directo ofessional fundraising	rs, trustees or key services?	Yes X No
<b>b</b> If 'Yes,' list the ten high	est paid individuals or ent	tities (fundrais	ers) pursuai	nt to agreements under v	which the fundraiser is to	
<u> </u>	\$5,000 by the organizat		10.1	(iv) Cross receipts	L (A) Amount poul to	L (vi) Amount paid to
(i) Name and address of or entity (fundraise		have custo	fundraiser ody or control tributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		column (v)	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10	•			<del>.</del>		
Total.	4		<b>_</b>	,		0.
3 List all states in which	the organization is register	red or licensed	d to solicit c	ontributions or has been	notified it is exempt from	n registration
or licensing.	•					
					<b></b>	
					<del>-</del>	
		<b></b>	<del>-</del>			
			<b>-</b>		<del>-</del>	

Sche	dule	<b>G</b> (Form 990 or 990-EZ) 2013 Montana	a Conservation	Voters Inc.	81-052	
Par	t II	Fundraising Events. Complete if more than \$15,000 of fundraising	the organization ar	nswered 'Yes' to Fo	rm 990, Part IV, Iir	ne 18, or reported
		List events with gross receipts gre	eater than \$5,000.	s and gross income	0111 01111 990-LZ,	illes i and ob.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a)
R E V			Annual Meeting (event type)	(event type)	None (total number)	through column (c)
REVENUE	1	Gross receipts	16,849.			16,849.
-	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2) .	16,849.			16,849.
	4	Cash prizes .				
D	5	Noncash prizes	350.		<u> </u>	350.
D I RECT	6	Rent/facility costs	1,151.			1,151.
	7	Food and beverages .	3,500.		·	3,500.
X	8	Entertainment .	150.			150.
EXPEZSES	9	Other direct expenses .	_			
S	10 11	Direct expense summary. Add lines 4 thr Net income summary. Subtract line 10 fr			. •	5,151.
Par		Gaming. Complete if the organiza				11,698.
		\$15,000 on Form 990-EZ, line 6a				
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ĕ	1	Gross revenue				
	2	Cash prizes .				
D I P E N S E S	3	Noncash prizes				
E N C S T E S	4	Rent/facility costs				
	5	Other direct expenses .				
		Volunteer labor	Yes %	Yes 8	Yes %	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)		•	
	8	Net gaming income summary. Subtract li	ine 7 from line 1, colum	n (d)	<u> </u>	
9	Ente	er the state(s) in which the organization of	perates daming activitie	c·		
a	a Is th	ne organization licensed to operate gaming	• •			Yes No
		e any of the organization's gaming license es,' explain:	es revoked, suspended	or terminated during the	tax year?	Yes No
BAA	1		TEEA3702L 0	06/26/13	Schedule G (Forr	n 990 or 990-EZ) 2013

Sche	edule <b>G</b> (Form 990 or 990-EZ) 2013 Montana Conservation Voters Inc8	1-05210	30	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	. [	Yes	No
13	Indicate the percentage of gaming activity operated in:			
	The organization's facility	13a		용
Ŀ	An outside facility	13Ь		8
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	s:		
	Name •			
	Address ►			<b>-</b>
15:	Does the organization have a contact with a third party from whom the organization receives gaming revenue	a.?	Yes	□No
	of if 'Yes,' enter the amount of gaming revenue received by the organization > \$ and t		□,,,,	□
_	of gaming revenue retained by the third party > \$			
	: If 'Yes,' enter name and address of the third party			
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
t	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the		
Par	organization's own exempt activities during the tax year ► \$  Supplemental Information. Provide the explanations required by Part I, line 2b, co and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide an information (see instructions).			v),
				<del></del>
			-	

## 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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

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.

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

Montana Conservation Voters Inc. 81-0521030 Form 990, Part III, Line 1 - Organization Mission Montana Conservation Voters, Inc.'s primary exempt purpose is to educate and activate voters to be vital and effective participants in Montana's democratic process, to protect air and water quality, public health, fish and wildlife and open space. MCV informs the public about the votes and actions of local, state and federal elected officials pertaining to conservation and environmental issues, and encourages their involvement in government. Form 990, Part III, Line 4a - Program Service Accomplishments Conservation Policy Campaign: MCV's 2013 Conservation Policy Campaign was dedicated to the defending Montana's clean air, clean water, fish and wildlife protections and responsible growth policies in the legislature. With support from MCV Education Fund, MCV\_convened weekly "Conservation Working Group" meetings (comprised of 13 allied groups also working in the legislature) to discuss priorities and coordinate public education. MCV prepared weekly "Hot Lists" for legislators and other public officials, organized one meeting with the Governor and ongoing meetings with administrative staff to promote passage of legislation to protect the environment, and defeat bills attacking the environment and Montana's growing renewable energy industry. MCV also coordinated, with the Conservation Working Group, one legislative social attended by 176 people, and 4 lobby days (see b, below). Accomplishments include the defeat or a <u>veto</u> of all but 1 of over 80 bills that would have harmed Montana's clean water, wild country and renewable energy, and adoption of a positive interim study proposal on the state's Renewable Energy Standards. After the legislature, MCV staff participated in interim legislative committee meetings of the Environmental Quality Council and Energy Committee and were asked to help with public education and outreach regarding the Salish Kootenai Water Compact,

enrollment of 793 new MCV members and nearly 3,000 new associate members.

organizing program. Chief accomplishments included a door to door membership canvass

in 7 communities which resulted in 18,212 door knocks, conversations with nearly

8,000 voters about the importance of protecting public lands in Montana, and the

	,
Schedule <b>0</b> (Form 990 or 990-EZ) 2013  Name of the organization	Page 2 Employer identification number
Montana Conservation Voters Inc.	81-0521030
Form 990, Part III, Line 4b - Program Service Accomplishments	
MCV's second accomplishment was passage, as part of a coalition	of groups, of the
"Mountain Line" mill levy, to improve and expand Missoula, MT's	bus service. The
policy_reduces_auto-emission_pollution_and_single_vehicle_use_o	f Missoula_residents
by expanding the bus service and improving service. It was the	only environmental
measure on the ballot in any Montana community in November, 201	3. MCV coordinated a
door to door canvass and phone bank program to enroll voters an	d to ensure return of
their mailed ballots.	
MCV's four chapters, Yellowstone Cty, Gallatin-Park Cty, Missou	la_Cty_and_Flathead
cty_each_convened_membership_meetings_after_the_2013_legislatur	re, inviting the
public_and_legislatorsChapter_boards_met_8-9_times_per_year.	
Total expenses: \$62643	
Form 990, Part III, Line 4c - Program Service Accomplishments	<b></b>
Leadership and Staff Development: A hallmark of MCV's 2013 wor	k was a series of 4
leadership trainings held monthly as part of "Lobby Days" in He	elena, MT during the
legislative session. A total of 121 people attended (some more	e than once) and
expanded their skills and knowledge of state legislative issues	and policy advocacy.
MCV used some of the components of these trainings to develop	skills_of
Missoula-area members to work effectively for the passage of the	ne Mountain Line mill
levy proposal (see c, below). These trainings were also well	evaluated, and MCV

Voters training meeting in Grand Rapids, MI; two staff and 1 board member attended a

fundraising training in Seattle, WA; three leaders and 2 staff attended 2 public

Two MCV staff and 2 board members attended the national League of Conservation

used feedback to improve each one of its trainings.

Name of the organization  Montana Conservation Voters Inc.	81-0521030
Form 990, Part III, Line 4c - Program Service Accomplishments	
policy and advocacy training sessions in Washington, DC. Additi	onally, MCV staff
began training for a conversion to a new data base, as part of	a_4-state_pilot
project with the national League of Conservation Voters. MCV h	eld one chapter board
orientation session in 2013 attended by 6 board members, and an	orientation session
for 2 new board members. MCV's Executive Director and a board	member also attended
a financial management workshop in November, 2013 which is resu	lting in
improvements.	. <b></b>
	- <b></b>
Ongoing staff development included participation in monthly Lea	gue of Conservation
Voters Development Director calls, monthly organizing calls and	participation at
LCV's Executive Director meeting which included a staff develop	ment component. MCV
staff carried out their professional development plans including	g_training_on_civic
engagement, environmental policy and fundraising skills. MCV's	Executive Director
concluded participation in the Leadership Montana program.	·
Total_expenses: \$44,847	<b>-</b>
Form 990, Part VI, Line 11b - Form 990 Review Process	
The MCV board reviews the Form 990 before it is submitted. It	is_available_on_file
for review by members and the public upon request.	
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top	Management
Board performs an annual review at a board meeting	· <b></b>
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers	& Key Employees
Board performs an annual review at a board meeting	- <b></b>
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
All MCV governing documents are assembled in an organizational	manual_which_is
updated annually and reviewed by the Board and staff in an orie	entation session.
This manual is also available to all MCV members upon request.	The organizational

Schedule <b>0</b> (Form 990 or 990-EZ) 2013	Page <b>2</b>
	Employer identification number
Montana Conservation Voters Inc.	81-0521030
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available (c	ontinued)
manual is also reviewed annually by Chapter Board Representativ	es at one chapter
board_meeting_each_year	
<del></del>	
	<del>-</del>
	<del>-</del>
	<del>-</del>

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 2013

Open to Public Inspection

Employer identification number 81-0521030 Part 1 Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33. ► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Montana Conservation Voters Inc. Department of the Treasury Internal Revenue Service Name of the organization

(a) Name, address, and EIN (if applicable) of disregarded entity	thty Primary activity		(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(i)						
(2)						
	- <del></del>					
6						
	1 I 1 I 1 I					
Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.	ganizations Complete atons during the tax ye	if the organization ar.	answered 'Yes	on Form 990,	Part IV, line 34 be	cause it had
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(if section 501 (c)(3))	ttus Direct controlling entity	(g) Sec 512(b)(13) controlled entity?

(g) Sec 512(b)(13) controlled entity?	No		×						<b>_</b>	
Sec 512 controlle	Yes				•					
(f) Direct controlling entity			N/A							
(e) Public charity status (if section 501(c)(3))			501 (c) 3							
(d) Exempt Code section			501 (c) 3							
(c) Legal domicile (state or foreign country)			MT							
(b) Primary activity		Research and	education to MT conservtion							
<b>(a)</b> Name, address, and EIN of related organization		(1) Montana Conservation Voters Educat		<u>(2)</u>		(3)		<del>[0]</del>		

Schedule R (Form 990) 2013

TEEA5001L 06/26/13

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

Schedule R (Form 990) 2013 Montana Conservation Voters Inc.

| Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 |
| Part III | Identification of Related Organizations Taxable as a partnership during the tax year.

(c) Legal domicile (state or
foreign country)
_
Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.
(a) (b) Name, address, and EIN of related organization (b) Primary activity
<del>- i</del>
·
!
<del>-</del>
<del>-1 -</del>
-i

81-0521030

Schedule R (Form 990) 2013 Montana Conservation Voters Inc.

81-052

Part V Transactions With Related Organizations Complete of the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

	, ,				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	õ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ed in Parts II-IV?				
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity		:	_a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)			1 p		×
c Gift, grant, or capital contribution from related organization(s)	:		اد	×	
			7		>
d Evans of Ivan guarantees to of for related organization(s).			? :	Ī	< >
E Loans of loan gualantees by related organization(s)			-	1	\
			ļ	Ì	
f Dividends from related organization(s)			<b>-</b>		×
g Sale of assets to related organization(s)	:	: : : : : : : : : : : : : : : : : : : :	19		×
h Purchase of assets from related organization(s)			٦ ٦		×
i Exchange of assets with related organization(s)			=		×
i Lease of facilities, equipment, or other assets to related organization(s)			=		×
k Lease of facilities, equipment, or other assets from related organization(s)			, <u>x</u>		<b>&gt;</b>
l Performance of services or membership or fundraising solicitations for related organization(s)			=		<b>:</b>  ×
	•		= ,	1	:   ه
m Performance of services or membership or fundraising solicitations by related organization(s)			E	Ī	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			10	×	
o Sharing of paid employees with related organization(s)			10	×	
p Reimbursement baid to related organization(s) for expenses			10		×
g Remain read by related organization(s) for expenses		•		>	1
d reinbulsenent pain by leigted organization(s) for expenses.			-	4	
			•	Ì	;
<ul> <li>Other transfer of cash or property to related organization(s)</li> </ul>		•	-	1	×
s Other			1s	┪	×
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	d relationships and tran	saction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	eterm nvolve	pa, eq
(1) Montana Conservation Voters Education Fd	υ	40,000.			
(2) Montana Conservation Voters Education Fd	а	11, 470.0	cost/time		allo
(3) Montana Conservation Voters Education Fd	0	155, 917.	cost/time		allo
3 7 7 11 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	ł	001 37	)		0110
(*) MOIICAIIA COIISEIVALIOII VOLEIS EUUCALIOII FU	5	100.	COSC/ CIII	- 1	
(9)					
(9)					
<b>BAA</b> TEEA5003L 06/27/13		Schedul	Schedule R (Form 990) 2013	(066	2013

Schedule R (Form 990) 2013 Montana Conservation Voters Inc.

Unrelated Organizations Taxable as a Partnership Complete of the organization answered 'Yes' on Form 990, Part IV, line 37. Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

rection 512-514)  rection 512-514)  rection 512-514)  rection 512-514)  rection 512-514)  rection 512-514)  rection 512-514)  rection 512-514)  rection 512-514)	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	Share of	Share of	(h) Dispropor-	Code V-UBI	General or	(k) Percentage
Section 512-514) Yes No.			(state or toreign country)	recome (related, unrelated, excluded from tax under	section 501(c)(3) organizations?			uonate allocations?	20 of Schedule K-1 Form (1065)	managing partner?	dius James dius
				section 512-514)	Yes			Yes No	,	Yes No	
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o end om	Provide additi	onal information for responses to questions on Sched	ule R (see instructions).
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