

Form 990

OMB No 1545 0047 2017

Return of Organization Exempt From Income Tax
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.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury

Inter	nai Reveni	ne Service	- Go to www.iis.gov/r offilisso for ilistract		1	
Α	For the	2017 calend	dar year, or tax year beginning	, 2017, and ending		·
В	Check if a	pplicable	С		D Employer identi	fication number
	Addre	ess change	Montana Conservation Voters Inc.		81-0521	030
	Name		PO-Box 63		E Telephone numb	per
	\vdash		Billings, MT 59103		(406) 2	54-1593
	\vdash	return/terminated			(100)	<u> </u>
	H	nded return			G Gross receipts	\$ 610,355.
	\vdash		F Name and address of principal officer	V I Inc	a) Is this a group return for sub	
	L.J Appii	ication pending		1 4 1		☐ 163 ☐ TO
	T		Same As C Above	17/->/1>	 Are all subordinates included if 'No,' attach a list (see ins 	tructions)
<u> </u>		empt status		17(a)(1) or 1 527		
l	Webs	site: > ww	w.mtvoters.org		c) Group exemption number	
K		f organization	X Corporation Trust Association Other ►	L Year of formation	1998 M State of I	egal domicile MT
Pa	rt I	Summar				
			be the organization's mission or most significant activit			
a	v	/ital_an	d effective participants in Montan	<u>a's democrati</u>	<u>process, to p</u>	rotect_air
읉	<u>a</u>	and wate	r quality, public health, fish and	<u>wildlife and</u>	open_space.	
Governance	_					
8	2 C	heck this bo	, ,	or disposed of more	than 25% of its net ass	sets
			ting members of the governing body (Part VI, line 1a)		3	13
Activities &			dependent voting members of the governing body (Par	· ·	4	13
ij≘			of individuals employed in calendar year 2017 (Part V	, line 2a)	5	23
훓			of volunteers (estimate if necessary)		6	250
₹			ed business revenue from Part VIII, column (C), line 12		7a	0.
	DIN	iet unrelated	business taxable income from Form 990-T, line 34		7b	0.
Revenue	•]	Prior Year	Current Year
			and grants (Part VIII, line 1h)	150	494,980.	593,978.
		~	rice revenue (Part VIII, line 2g) RECEN	'EU		
	10 In	ivestment in	come (Part VIII, column (A), lines 3, 4, and 7d)	10)	107.	182.
ш.	11 0	iner revenue	e (Part VIII, column (A), lines 5, 66, Bc, 9c, 10c, and 1 e – add lines 8 through 11 (must eigual Part VIII, colum		12,567.	12,687.
					507,654.	606,847.
			milar amounts paid (Part IX, column (A), lines 1-3)	- SE		
	14 B	enetits paid	to or for members (Part IX, column (A) (I) 4 1	172		
S	15 S	alaries, othe	er compensation, employee benefits (Part IX column)	A), Imes 5-10)	267,519.	258,304.
3e	16 a P	rofessional f	fundraising fees (Part IX, column (A), line 11e)			
Expenses	b To	otal fundrais	sing expenses (Part IX, column (D), line 25) ▶	111,595.		
ŭ	17 0	ther expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)		72,099.	562,531.
			es Add lines 13-17 (must equal Part IX, column (A), li	ne 25)	339,618.	820,835.
		•	expenses Subtract line 18 from line 12	10 20)	168,036.	
× 2		CVCHUC 1033	expenses Subtract line to from line 12			-213, 988. End of Year
ets or	20 T	ntal assets ((Part X, line 16)	}	Beginning of Current Year 325, 537.	
			s (Part X, line 26)	}	325,557.	111,168.
Net Ass Fund Ba					·····	
			fund balances Subtract line 21 from line 20		325,156.	111,168.
Pa	rt II	Signatur	e Block			
Unde	r penalties	s of perjury, I de	clare that I have examined this return, including accompanying schedule: rer (other than officer) is based on all information of which preparer has	s and statements, and to the	best of my knowledge and believed	ef, it is true correct, and
		-)	any moments	 	1.6
		Signatur	re of Officer			8
Sig	ın	Signatur T) X	1 3047120	_	Date	
He	re	<u> </u>	DEIN SAHA, VICE CHA	118		
			print name and title			
		Print/Type p	reparer's name Preparer's signature	Date.	Check Tif	D2012 804
Pa	id	Da	verter 1	17/11/1	self employed	POOB 51884
Pre	eparer		DARCI HERTZ			
Us	e Only	Firm's addre	PO BOX 22912		Firm's EIN ► 454	1884304
		1	BILLINGS, MT 59104			-690-2427

May the IRS discuss this return with the preparer shown above? (see instructions)

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 08/08/17

X Yes

No Form **990** (2017)

	1990 (2017) MONTANA CONSERVATION VOTERS INC.	RT-0	52103	U		age 2
r,ar	Statement of Program Service Accomplishments					<u></u>
1	Check if Schedule O contains a response or note to any line in this Part III					X
ľ	and y are the organization of the control of the co					
	See Schedule 0	- -	· -			
		- -				
2	Did the organization undertake any significant program services during the year which were not listed on the prior					
2	Form 990 or 990-EZ?			V	[v]	NI.
	If 'Yes,' describe these new services on Schedule O			Yes	X	No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services.	0007		V	v	NI-
3	If 'Yes,' describe these changes on Schedule O	ces		Yes	X	No
4	Describe the organization's program service accomplishments for each of its three largest program service			J L		
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations and revenue, if any, for each program service reported	to other	rs, the t	otal ex	pens	es,
4 a	a (Code) (Expenses \$ 566,438. including grants of \$) (Re	venue	\$)
	See Schedule 0		· —			
4 b	(Code) (Expenses \$ 67,857. including grants of \$) (Re	venue	\$)
	See Schedule 0					
			·			
						<u> </u>
			. 			
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
4 0	: (Code) (Expenses \$18,839. including grants of \$) (Re	venue	\$			)
	See Schedule 0					- <del></del> -
			<b></b> .			
	***************************************					
	~-~					
			<del>_</del>			
<del></del> -						
4 0	d Other program services (Describe in Schedule O )				,	
	(Expenses \$ including grants of \$ ) (Revenue \$				)	
4 e	e Total program service expenses ► 653,134.					

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	•		Yes	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	X	
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		Х
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		X
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			
	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	
	<b>b</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		X
	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		Х
	<b>b</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 $170(b)(1)(A)(ii)^{9}$ If Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		_ X
	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	
	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		х
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Form 990 (2017) Montana Conservation Voters Inc.

Partiv Checklist of Required Schedules (continued)

•			Yes	No
<b>20</b> a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 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 or for domestic individuals on Part IX, column (A), line 2º If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
	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
ŀ	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		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) 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
t	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		X
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 'Yes,' 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)			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	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		X
	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		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
١	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> 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
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197  Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (	(2017)

# Form 990 (2017) Montana Conservation Voters Inc. 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				
1 -	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1.0	O WALLEN	Yes	No
	b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable between the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 a		'n	
	• • • • • • • • • • • • • • • • • • • •	_ 1 b	0		
	: Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eportable gaming	1 c	X	y marin
2 a	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	2 a	23		
b	olf at least one is reported on line 2a, did the organization file all required federal employmen	t tax returns?	2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in	structions)		<b>198</b>	
	Did the organization have unrelated business gross income of \$1,000 or more during the yea	r ⁷	3 a		X
t	olf 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3 b		
4 a	i At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other fi	er authority over, a nancial account)?	4 a		Х
Ł	olf 'Yes,' enter the name of the foreign country		77.7		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	` '			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	-	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt	er transaction?	5 b		Х
C	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
<b>6</b> a	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a	Х	
Ł	of Yes, did the organization include with every solicitation an express statement that such contribut not tax deductible?	ions or gifts were	6 b	Х	
7	Organizations that may receive deductible contributions under section 170(c).		#30 <b>4</b> .13	1	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and p services provided to the payor?	artly for goods and	7 a		
b	of Yes, did the organization notify the donor of the value of the goods or services provided?		7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas required to file	7 c		
c	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d		, j. 94	
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 ben	efit contract?	7f.		
ç	g if the organization received a contribution of qualified intellectual property, did the organization file as required?	Form 8899	7 g		
ŀ	if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the sponsoring		200	Karan
	organization have excess business holdings at any time during the year?		8	Today com was I	176V-2004 1
	Sponsoring organizations maintaining donor advised funds.				
	a Did the sponsoring organization make any taxable distributions under section 4966?	_	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related per	son ³	9 b	zagajanas.	31.800 in 100
	Section 501(c)(7) organizations. Enter	10-1			
	a Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
	Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	11 a			
		114		7.5	
	a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	11b	12		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	1 1	12a	SAMMIN.	92111141
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.	[12b]			<b>18</b> 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	a Is the organization licensed to issue qualified health plans in more than one state?		13a		
č	Note. See the instructions for additional information the organization must report on Schedul	e O	134	SISSIAN	
ı	Enter the amount of reserves the organization is required to maintain by the states in				3.2
	which the organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c	3.4	24500	X
	a Did the organization receive any payments for indoor tanning services during the tax year? of If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schadula O	14a 14b		<del>  ^</del>
AA		Schedule O		990	L (2017

form 990 (2017) Montana Conservation Voters Inc. 81-0521030 Page 6 Rativi Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Х 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? X 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 See Schedule Q 6 Did the organization have members or stockholders? 6 Х 7 a 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? See Schedule O 7 a X **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8 a X **b** Each committee with authority to act on behalf of the governing body? 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10 a X 10 a Did the organization have local chapters, branches, or affiliates? b If '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? 10b Х X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х Schedule O how this was done See Schedule O 12c 13 Did the organization have a written whistleblower policy? 13 Х X 14 Did the organization have a written document retention and destruction policy? 14 15 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? Х a The organization's CEO, Executive Director, or top management official See Schedule 0. 15 a 15b b Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a taxable entity during the year? b 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 take steps to safeguard the organization's exempt status with respect to such arrangements? 16 b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Other (explain in Schedule O) Own website Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year See Schedule O

State the name, address, and telephone number of the person who possesses the organization's books and records

The Organization 2822 3rd Ave, Ste 203 Billings MT 59101 (406) 254-1593

Form 990 (2017)	Montana	Conservation	Voters	Tnc
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81-0521030

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## Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 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

(0)

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

		(C)			- 1					
(A) Name and Title		thar	n one b s both a	ox, u	inless ficer a ruste	e)	n	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per 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)	from the organization and related organizations
(1) Dave Tyler	2									_
Director	0	] X						0.	0.	0.
(2) Jock Conyngham	2				ĺ					
Director	0	<u>  x</u>				- 1		0.	0.	0.
(3) Juanita Vero	3									
Chairperson	0	X		X				0.	0.	0.
(4) Paul Vestal	2		.							-
	0	X						0.	0.	0.
(5) Robin Saha	3									
Vice Chair	0	X	:	X				0.	0.	0.
(6) Brandon Demars	2									
Director	0	X						0.	0.	0.
(7) Dave Chadwick	2									
Director	0	X						0.	0.	0.
(8) Neva Hassanein	1			T						
Director	0	X						0.	0.	0.
(9) Laurel Angell	1	}								
Director	0	X						0.	0.	0.
(10) Chris Saeger	1									
Director	0	] x						0.	0.	0.
(11) Elizabeth Ametsbichler	3									
Treasurer	0	X		x				0.	0.	_0
(12) Addison Sessions	1						ı			
Director	0	<u> </u>						0.	0.	0.
(13) Derf Johnson	2									
Secretary	0	X		x L				0.	0.	0.
(14) Clayton Elliott	40		1 T	T			T			
Executive Director	22				Х			85,000.	46,682.	0.

2

Ex/Mpricario	Section A. Onicers, Directors, Tru		T		•		es, a	anc	i nigilest Coll	perisaleu Er	inployees (continuea)
•		(B)			(( Box	•					
	(A)	Average hours			Position check more than one ess person is both an				(D)	(E)	(F)
	Name and title	per week	offic			direct	or/trus	tee)	Reportable compensation from the organization	Reportable compensation from related organization	Estimated m amount of other
		(list any hours	Individual or director	nst	Officer	€ €	High	Forr	(W 2/1099 MISC)	(W 2/1099-MISC)	ns compensation from the organization
		for related	rect.	E O	ę	<u>a</u>	loye	ner			and related organizations
		tions	0 2	쿒		Key employee	omp				5. ga. 1.201.01.0
		below dotted	ndividual trustee or director	nstitutional trustee		6	ens:				
		line)		ਲ			Highest compensated employee				
(15)						-	<del> </del>				-
'			1								
(16)			1								
(17)											
			ļ								
(18)_											
(10)							ļ			···	
<u>(19)</u> _			-								
(20)			1								-
(20)_	<del></del>		1								
(21)			<del> </del>			-		$\vdash$			
<u></u>	~		1								
(22)	· . · · · · · · · · · · · · · · · · · ·		$\vdash$								
						ļ					
(23)											
			<u> </u>				<u> </u>				
(24)_											
			<u> </u>				ļ				
(25)											
160	Sub-total		<u> </u>					<u> </u>	85,000.	46,68	2. 0.
	Total from continuation sheets to Part VII, Section	on A						<b></b>	0.		$\frac{2}{0}$ . 0.
	Total (add lines 1b and 1c)							<b>&gt;</b>	85,000.	46,68	
2	otal number of individuals (including but not limited	to those I	ısted	abo	ve) v	who	recei	ved			
1	rom the organization 🕨 0										
											Yes No
	Old the organization list any former officer, direc			key	em/	plo	yee,	or h	ighest compensat	ed employee	
(	on line 1a ⁷ If 'Yes,' compléte Schedule J for such	h individu	ıaı								3 X
4	or any individual listed on line 1a, is the sum of he organization and related organizations greate	reportable	le cor	mpe	nsa If '\	tion	and	oth	er compensation f	rom	4.5
	such individual	i tildii <b>y</b> i	30,00	,,	"	, 03,	COII	Pic	te benedate 5 tot		4 X
5 !	Old any person listed on line 1a receive or accrue	e compen	satio	n fro	om .	any	unre	late	d organization or	ındıvıdual	
	or services rendered to the organization? If 'Yes	,' comple	te So	chea	lule	J fo	r suc	h p	erson		5 X
Section 1	on B. Independent Contractors Complete this table for your five highest compens	sated inde	enen	lent	COL	ntrac	tors	that	t received more th	an \$100 000 of	
	compensation from the organization. Report compen	sation for	the c	alen	dar	year	endi	ng v	with or within the or	ganization's tax	year
	(A)								(B)	)	<b>(C)</b> Compensation
	Name and business add	622							Description	or services	Compensation
											<del></del>
2	Total number of independent contractors (including t	out not lim	ited t	o the	ose	liste	d abo	ve)	who received more	than	A Company
	\$100,000 of compensation from the organization										

tsm y suc	. Check if Schedule O contains a response or note to any line in this Part VIII										
				- F. H. W.	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
nts nts	1 a	Federated campaigns	1 a			4	7010 3 CT	14			
iran	b	Membership dues	11								
S, G	¢	Fundraising events.	10	:		# 5/#					
Siff lar,	d	Related organizations	10	i							
S, E	е	Government grants (contribution	ons) 1 e								
Contributions, Gifts, Grants and Other Similar Amounts		All other contributions, gifts, g similar amounts not included a		<u> </u>	sal de la companya d La companya de la co	e graphe de Mar					
통	_	Noncash contributions included <b>Total.</b> Add lines 1a-1f	in lines 1a-1f	·	<i>144-4-11</i>						
<u>0</u> 8		Total. Add liftes 1a-11		Business Code	593,978.		the grant and the				
Program Service Revenue	2 a			business code							
ě	b			- <del> </del>							
e	c										
ξŽ	4			- <del> </del>							
Ϋ́	<u>د</u>				<del> </del>						
3rar	f	All other program service	e revenue	<u> </u>	<del> </del>						
ξ		Total. Add lines 2a-2f	ororonaa	<u> </u>							
_	3	Investment income (incl	udına dıvıden	ds interest and			Comment of the state of the sta	1///// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014/// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014// 1/2014/			
		other similar amounts)	daing aividen	b	182.	182.					
	4	Income from investment	of tax-exemp	ot bond proceeds							
	5	Royalties		•							
			(ı) Real	(II) Personal	THE STATE OF	915 250					
	6 a	Gross rents.			2.00		94	100			
	b	Less rental expenses									
	С	Rental income or (loss)					4.0				
	d	Net rental income or (lo	ss)	•	-						
	7 a	Gross amount from sales of	(i) Securities	(II) Other			<b>第</b> 字》:"我				
		assets other than inventory				1000	1907 C.	14 14 14 14 14 14 14 14 14 14 14 14 14 1			
	ь	Less cost or other basis			A STATE OF			The state of the s			
		and sales expenses					21,000				
		Gain or (loss).				To the second	1				
	d	Net gain or (loss)		-	•			Tananinare Willia Inchini Sha Puninarebra			
퍒	8a	Gross income from fund	Iraising event	5			77 32				
Ę		(not including \$		_	46.	and the second					
ě		of contributions reported	on line ic)				A ASSESSMENT	T Paragraphic Control of the Control			
<u> </u>	١.	See Part IV, line 18		a 16,195.							
Other Rev	l .	Less' direct expenses	6 4	b 3,508.				10.00			
0		Net income or (loss) fro	_	events	12,687.	100	25 10 10 10 10 10 10 10 10 10 10 10 10 10	12,687.			
	9 a	Gross income from gam See Part IV, line 19	ing activities	a							
		Less direct expenses		å							
		Net income or (loss) fro	m damind act	ıvıtıes •			\$\tag{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\tint{\tint{\tint{\tint{\tint{\text{\text{\tint{\text{\text{\tin\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\tint{\text{\text{\text{\text{\tint{\text{\tint{\text{\text{\tint{\text{\text{\text{\tint{\text{\ti}\tint{\text{\ti}\tint{\tin\tint{\text{\tint{\text{\tint{\text{\tint{\tint{\tinte\tint{\t				
	l	•			9.97 (646) (849)						
	IUa	Gross sales of inventory and allowances	, iess returns	a			100				
	ь	Less cost of goods sold	j	b							
	l	Net income or (loss) fro		ventory •							
		Miscellaneous Revenu		Business Code			W-1.7.7.7				
	11 a										
	b	,					[				
	c										
	d	All other revenue									
	e	Total. Add lines 11a-11d	d	•		est to a real of the		a Market Control			
	12	Total revenue. See insti	ructions		606,847.	182.	0.	12,687.			
544								E 000 (0017)			

	tion 501(c)(3) and 501(c)(4) organizations must cor Check if Schedule O contains a i			omplete column (A)	X
	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	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				eren j
4	Benefits paid to or for members			4.5	
5	Compensation of current officers, directors, trustees, and key employees	38,303.	18,303.	11,696.	8,304.
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	178,309.	86,952.	24,154.	67,203.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,673.	2,809.	3.	1,861.
9	Other employee benefits	16,983.	8,476.	2,825.	5,682.
10	Payroll taxes	20,036.	8,714.	4,957.	6,365.
11	Fees for services (non-employees)				
	a Management	_			
	<b>b</b> Legal				
	c Accounting	322.	95.	187.	40.
	d Lobbying		\$ 55.55 FEMALES SEE	733 N S S S S S S S S S S S S S S S S S S	<u> </u>
	e Professional fundraising services See Part IV, line 17  f Investment management fees	<del></del>		And the second	
	1 Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule 0 $Sch$	500,779.	499,429.	1,350.	
	Advertising and promotion	462.	386.	61.	15.
13 14	Office expenses Information technology	652. 4,856.	203. 2,661.	65. 87.	384. 2,108.
15	Royalties.	4,030.	2,001.	07.	2,100.
16	Occupancy	11,522.	6,546.	1,685.	3,291.
17	Travel	18,027.	8,393.	5,655.	3,979.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	20/02/.	3,330.	3,000.	0,000
	Conferences, conventions, and meetings	1,234.	1,020.	185.	29.
20	Interest				
21	Payments to affiliates  Depreciation, depletion, and amortization				
22 23		524.	189.	63.	272.
24		524.	109.	03.	212
	a Canvass	6,635.	THE SECTION OF THE COMMUNICATION OF THE PROPERTY OF THE SECTION OF THE PROPERTY OF THE SECTION O	The state of the s	6,635.
	b Printing and Publications	5,839.	4,120.	60.	1,659.
	C Dues/Registrations	4,425.	3,942.	110.	373.
	d Postage and Shipping	3,140.	808.	57.	2,275.
	e All other expenses	4,114.	88.	2,906.	1,120.
25	Total functional expenses Add lines 1 through 24e	820,835.	653,134.	56,106.	111,595.
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)				
BA		TEEA0110L 0	<u></u>	<u> </u>	Form <b>990</b> (2017)

		Check if Schedule O contains a response or note to any line in this Part X			П			
			(A) Beginning of year		<b>(B)</b> End of year			
	1	Cash – non-interest-bearing	33,988.	1	20,387.			
	2	Savings and temporary cash investments.	290,241.	2	89,923.			
	3	Pledges and grants receivable, net		3				
	4	Accounts receivable, net		4				
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5				
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	-2-33	6				
Ø	7	Notes and loans receivable, net		7				
Assets	8	Inventories for sale or use		8				
As	9	Prepaid expenses and deferred charges		9				
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a  7,535.			2			
	b	Less accumulated depreciation 10b 7,535.		10 c				
	11	Investments — publicly traded securities		11				
	12	Investments - other securities See Part IV, line 11		12				
	13	Investments - program-related. See Part IV, line 11		13				
	14	Intangible assets		14				
	15	Other assets See Part IV, line 11	1,308.	15	858.			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	325,537.	16	111,168.			
	17	Accounts payable and accrued expenses		17				
	18	Grants payable		18				
	19	Deferred revenue		19				
	20	Tax-exempt bond liabilities		20				
<u>.</u> ë	21	Escrow or custodial account liability Complete Part IV of Schedule D	Sannanian - Sannanian in Sannan	21				
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		<u></u> 22	7 To F			
-	23	Secured mortgages and notes payable to unrelated third parties		23				
	24	Unsecured notes and loans payable to unrelated third parties		24				
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	381.	25				
$\dashv$	26	Total liabilities. Add lines 17 through 25	381.	26	0.			
nces		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.						
<u>_e</u>		Unrestricted net assets	325,156.	27	111,168.			
Ba	28	Temporarily restricted net assets	·	28				
밀	29	Permanently restricted net assets	San annuar exemples a secretar exemples and early	29	**************************************			
Net Assets or Fund Bala		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.						
\$	30	Capital stock or trust principal, or current funds		30				
88	31	Paid-in or capital surplus, or land, building, or equipment fund		31				
۲	32	Retained earnings, endowment, accumulated income, or other funds		32				
2	33	Total net assets or fund balances	325,156.					
1	34	Total liabilities and net assets/fund balances.	325,537.	34	111,168.			
BA	4				Form <b>990</b> (2017)			

		1-0521030	Pa	age <b>12</b>
Pa	teXI∭ Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	606,	847.
2	Total expenses (must equal Part IX, column (A), line 25)	2	820,	
3	Revenue less expenses Subtract line 2 from line 1	3	-213,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	325,	
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	111,	168.
Pa	TXII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			X
			Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual X Other See Sch.  If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O	0		WEE Y
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis	ewed on a		
	Were the organization's financial statements audited by an independent accountant?		2 b	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis	arate		2
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	udit,	2 c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	le	3 a	X
	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit	3 b	
BAA			Form <b>990</b>	(2017)

#### 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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ.
 Go to at www.irs.gov/Form990 for instructions and the latest information

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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

If the organization answered 'Yes,' on 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,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• ;	Section 501(c)(4), (5), or (6) o	organizations Complete Part III			
Name	of organization Montana	Conservation Voters Inc.	· · · · · · · · · · · · · · · ·	Employer identifica	
4 20.4				81-052103	
Mindinbard	ayaan ahaan, I	rganization is exempt under section		<u> </u>	ration.
1		organization's direct and indirect political c in of 'political campaign activities')	ampaign activities in	Part IV. See Part	IV
2		xpenditures (see instructions)		►ŝ	7,446
3		campaign activities (see instructions)		*	100
		rganization is exempt under section	on 501(c)(3).		
1	CARAGONIA -	ise tax incurred by the organization under		<b>▶</b> \$	
2	Enter the amount of any exc	ase tax incurred by organization managers	under section 4955	<b>►</b> \$	
3	•	a section 4955 tax, did it file Form 4720 for			Yes No
4	a Was a correction made?		-		Yes No
	b If 'Yes,' describe in Part IV				
Pa	rt I-C Complete if the o	rganization is exempt under section	on 501(c) , except	section 501(c)(3).	<del> </del>
1		pended by the filing organization for section			3,000
2	Enter the amount of the filing function activities	organization's funds contributed to other organ	izations for section 527	7 exempt ►\$	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3	Total exempt function expendine 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	<b>&gt;</b> \$	3,000
4	Did the filing organization fil	e Form 1120-POL for this year?			X Yes No
5	organization made payments amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the aris received that were promptly and directly delaif action committee (PAC). If additional spa	nount paid from the fi	lling organization's fund ditical organization, such	s Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization s funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)	MT Conservation Voters Action Fund	2822 3rd Ave, Ste 203 Billings, MT 59101	81-0531919		1,509
(2)	Public Policy Polling	2912 Highwoods Blvd, Ste Raleigh, NC 27604		3,000.	
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2017

Calendar year (or fiscal year beginning in)

Calendar year (or fiscal year beginning in)

(a) 2014

(b) 2015

(c) 2016

(d) 2017

(e) Total

2 a Lobbying nontaxable amount

b Lobbying ceiling amount (150% of line 2a, column (e))

c Total lobbying expenditures

d Grassroots nontaxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

BAA

Schedule C (Form 990 or 990-EZ) 2017

## Part 11-5 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		)	(b)	
		No	Amount	
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 a 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?				
e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
<ul><li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li><li>i Other activities?</li></ul>				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912			···	
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	11000		to some and some and the little and some of a some book with	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

## Partill-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Х
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		Х
1/00	5. 355(CDA///d			

# (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
ā	a Current year	2 a	
Ł	Carryover from last year	2 b	
(	: Total	2 c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0.
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0.

### Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

#### Part I-A, Line 1 - Direct and Indirect Political Campaign Activities

In the summer and fall of 2017, MCV chapter leaders and staff prepared non-partisan questionnaires mailed to candidates running for legislative, county commission, and all the statewide races.

# SCHEDÙLE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

Go to www irs.gov/Form990 for instructions and the latest information.

OMB No 1545 0047 2017 Open to Public Inspection

Employer identification number

	Montana Conservation Voters	s Inc.		81-0521030
Par	til Organizations Maintaining Dono	r Advised Funds or Other Simila	r Funds or Acc	
<b>)</b>	Complete if the organization ansi	wered 'Yes' on Form 990, Part IV	, line 6.	
		(a) Donor advised funds	<b>(b)</b> F	unds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)	•		
4	Aggregate value at end of year			
5	Did the organization inform all donors and dor are the organization's property, subject to the	or advisors in writing that the assets held organization's exclusive legal control?	d in donor advised	funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that gran of the donor or donor advisor, or for any	nt funds can be use other purpose con	ed only ferring Yes No
Par	till. Conservation Easements.			-
	Complete if the organization ans	wered 'Yes' on Form 990, Part IV	, line 7.	
1	Purpose(s) of conservation easements held by			
	Preservation of land for public use (e g , r			lly important land area
	Protection of natural habitat	Preserv	ation of a certified	historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization last day of the tax year	neld a qualified conservation contribution in		
				Held at the End of the Tax Year
ä	Total number of conservation easements		2 a	
ı	Total acreage restricted by conservation ease	nents	2 b	
(	Number of conservation easements on a certification in the conservation can be supported by the conservation of the conservati	ied historic structure included in (a)	2 c	
	Number of conservation easements included i structure listed in the National Register Number of conservation easements modified, train	``	2 d	on during the
3	tax year	isterred, reseased, extinguished, or terminate	ed by the organization	on daming the
4	Number of states where property subject to conse	rvation easement is located >		
5	Does the organization have a written policy re and enforcement of the conservation easemer		on, handling of viol	ations, Yes No
6	Staff and volunteer hours devoted to monitoring,	nspecting, handling of violations, and enforc	cing conservation ea	sements during the year
7	Amount of expenses incurred in monitoring, insper ►\$	ecting, handling of violations, and enforcing	conservation easem	ents during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements	of section 170(h)(	4)(B)(ı) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote			
Pai	Conservation easements.  Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasure wered 'Yes' on Form 990, Part IV	es, or Other Sin	nilar Assets.
1:	a If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	eld for public exhibition, education, or resear	ch in furtherance of	
1	o If the organization elected, as permitted under historical treasures, or other similar assets held f following amounts relating to these items	SFAS 116 (ASC 958), to report in its rev or public exhibition, education, or research ii	venue statement a n furtherance of pub	nd balance sheet works of art, lic service, provide the
	(i) Revenue included on Form 990, Part VIII,	line 1		<b>-</b> \$
	(ii) Assets included in Form 990, Part X			►\$
2	If the organization received or held works of art, I amounts required to be reported under SFAS		or financial gain, pro	
	a Revenue included on Form 990, Part VIII, line	1		<b>►</b> \$
1	Assets included in Form 990, Part X			▶\$

Part III Organizations Mainta	ining Colle	ctions	of Art, Histo	rical Treasures, o	r Other Similar Ass	ets (c	ontinu	ed)
3' Using the organization's acquisition items (check all that apply)	i, accession, a	nd other	records, check a	ny of the following that a	ire a significant use of its	collectio	า	
a Public exhibition			<b>d</b> Loan (	or exchange programs				
<b>b</b> Scholarly research			e Other					
<b>c</b> Preservation for future gener	rations		_					
4 Provide a description of the organiz Part XIII	zation's collect	ons and	explain how they	further the organization	's exempt purpose in			
5 During the year, did the organiza to be sold to raise funds rather the	nan to be mai	ntained	as part of the or	rganization's collection	?	Yes		No
Escrow and Custodia line 9, or reported an	<b>I Arrangen</b> amount on	<b>ents.</b> Form	Complete if t 990, Part X,	he organization ar line 21.	nswered 'Yes' on Fo	rm 991	), Par	t IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or oth	er intermediary	for contributions or oth	er assets not included	Yes	Γ	 ∏No
b If 'Yes,' explain the arrangement	ın Part XIII a	nd com	plete the following	ng table			L	<b>-</b>
						Amoun		
c Beginning balance					1 c			
<b>d</b> Additions during the year					1 d			
e Distributions during the year					1 e			
f Ending balance					1 f			
2 a Did the organization include an a	mount on Fo	m 990,	Part X, line 21,	for escrow or custodial	account liability?	Yes		No
<b>b</b> If 'Yes,' explain the arrangement								
Rart V Endowment Funds. C	Complete if	the or	nanization an	swered 'Yes' on F	orm 990 Part IV Ju	ne 10		
Litaovinenti anas. C	(a) Current		(b) Prior year				our year	s hark
1 a Beginning of year balance	(a) surrent	you.	(b) i i i i jeur	(0) 1 110 30213 522	(a) Three years back	1 (6)	our your	<u> </u>
<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								
g End of year balance			l					
2 Provide the estimated percentage		nt year	-	e 1g, column (a)) held	as			
a Board designated or quasi-endowm			°					
<b>b</b> Permanent endowment	%							
c Temporarily restricted endowmer			_%					
The percentages on lines 2a, 2b, a	nd 2c should e	qual 100	)%					
3 a Are there endowment funds not in organization by	the possession	of the o	organization that a	are held and administere	d for the		Yes	No
(i) unrelated organizations						3a(ı)		L
(II) related organizations						3a(iı)		
<b>b</b> If 'Yes' on line 3a(ii), are the rela	ated organizat	ions list	ed as required of	on Schedule R?		3b		
4 Describe in Part XIII the intended	d uses of the	organiza	ation's endowme	nt funds				
<b>Rart VI</b> Land, Buildings, and Complete if the organ			'Yes' on Forr	n 990. Part IV. line	e 11a. See Form 99	0. Par	t X. In	ne 10.
Description of property		(a) Cos	t or other basis	(b) Cost or other basis (other)	(c) Accumulated depreciation		Book va	
1 a Land		'''		555.5 (61.161)	dopresidation			
<b>b</b> Buildings.					Activities the second of the second s			
c Leasehold improvements		<del> </del>		<del></del> .				
d Equipment								
e Other				7,535.	7,535.			0.
Total. Add lines 1a through 1e. (Colum	nn (d) must e	Lual For	m 990. Part X i		1,333.			0.
BAA	(5) 11155 61	434, 1 01	550, 1 01, 17, 1	20.0 (2), 1110 100 )	Sched	ule <b>D</b> (F	orm 990	

Rant VIL Investments — Other Securities.		N/A
(a) Description of security or category (including name of security)	(b) Book value	0, Part IV, line 11b. See Form 990, Part X, line 12
(1) Financial derivatives	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(2) Closely-held equity interests		
(3) Other		
(A)	· · · ·	
(B)		
(C)		
(D)		
(E)	<del></del>	V-7-7-1
(F)		
(G)		
(H)		
(l)		
Total (Column (b) must equal Form 990, Part X, column (B) line 12)		The state of the s
Part VIII Investments — Program Related.	L'Ves' on Form 99	0, Part Ⅳ, line 11c. See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	(2) 20011 14120	(e) method of valuation least of child of year marrier value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		Committee II III.S. IS MANY AND COMMITTEE COMMITTEE STATE TO COMMITTEE STATE STATE OF THE COMMITTEE STATE OF T
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)	N/A	
Complete if the organization answered	l 'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15
	scription	(b) Book value
(1)		
(2)		
(4)		
(5)		
(6)		
(7)		
(8)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (b)	3) line 15 )	<b>&gt;</b>
Part X Other Liabilities.	5)	
Complete if the organization answered 'Yes' on F		
(a) Description of liability	<b>(b)</b> Book value	
(1) Federal income taxes		The state of the s
(2)		
<del>(4)</del>		
(5)	<del></del>	The state of the s
(6)		No. of the second secon
(7)		
(8)		The state of the s
(9)		
(10) (11)		- Carlotte Control of the Control of
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	<b>•</b>	
		inancial statements that reports the organization's liability for incertain
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fortax positions under FIN 48 (ASC 740). Check here if the text of the footnote.		

TEEA3303L 08/10/17

Schedule. <b>D</b> (f	Form 990) 2017	Montana	Conservation	Voters	Inc

81-0521030

Page 4

Part XI Reconciliation of Revenue per Audited Financial State	ments With Revenue p	er Return. N/A	<del>-</del>
<ul> <li>Complete if the organization answered 'Yes' on Form 9</li> </ul>	90, Part 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		F 32/1/1	
a Net unrealized gains (losses) on investments	2a	(#g/)	
<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		
e Add lines 2a through 2d.	<del></del>	2 e	
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	4 a		
<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	
Total revenue ridd lines 3 and 4c. (rins must equal rollin 350, r art i, line	· · · · · · · · · · · · · · · · · · ·		
Part XII Reconciliation of Expenses per Audited Financial Stat		per Return. N/A	
		per Return. N/A	
Part XII Reconciliation of Expenses per Audited Financial Stat		per Return. N/A	
Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered 'Yes' on Form 9			
Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements			
Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered 'Yes' on Form 9'  Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25	90, Part IV, line 12a.		
Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered 'Yes' on Form 9' 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities	90, Part IV, line 12a.		
Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments	2a 2b		
Reconciliation of Expenses per Audited Financial Stat Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses	2a 2b 2c		
Reconciliation of Expenses per Audited Financial State Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII )	2a 2b 2c	1	
Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII )  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1	2a 2b 2c	1 2 2 e	
Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII )  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1  a Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	1 2 2 e	
Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII )  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII )	2a 2b 2c 2d	1 2 e 3	
Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII )  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII )  c Add lines 4a and 4b	2a 2b 2c 2d 4a 4b	2 e 3	
Complete if the organization answered 'Yes' on Form 9'  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25  a Donated services and use of facilities  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII )  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1  a Investment expenses not included on Form 990, Part VIII, line 7b  b Other (Describe in Part XIII )	2a 2b 2c 2d 4a 4b	1 2 e 3	

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule **D** (Form 990) 2017

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 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.

► Go to www irs.gov/Form990 for the latest instructions.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

Montana Conservation Voters Inc. 81-0521030						
Partil Fundraising Activities. Comple Form 990-EZ filers are not re	te if the organiza	ation answi	ered 'Yes' o	on Form 990, Part IV, line	e 17	
1 Indicate whether the organization	aised funds the	ough any	of the follo	owing activities Check	all that apply	
a X Mail solicitations			е	X Solicitation of non-	government grants	
<b>b</b> $\overline{\mathbb{X}}$ Internet and email solicitations	i		f	Solicitation of gove	ernment grants	
c X Phone solicitations			g	X Special fundraising	j events	
<b>d</b> X In-person solicitations						
2 a Did the organization have a written o employees listed in Form 990, Par	r oral agreemen	t with any i	ndividual (i	including officers, directo	rs, trustees, or key	Yes X No
<b>b</b> if 'Yes,' list the 10 highest paid inc	-		-	_		
compensated at least \$5,000 by the	e organization			, add in the digital control of		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have custo	fundraiser dy or control	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by)
		Yes	ibutions?	-	column (ı)	organization
1		165	NO			
_						
2			]			
		<del> </del>				
3						
					_	
4						
4						
			:			
5						
		-	ļ			
6						
•						
7			ļ			
	·····	<del> </del>				
8					}	
		ļ				
9						
9						
			-			
10			İ			
	l		<u> </u>			
Total			•		1	0.
3 List all states in which the organization	on is registered	or licensed	to solicit o	contributions or has been	notified it is exempt from	
or licensing						
		_ <b></b>				
					<b></b>	

2		i dildidising Events. Complete ii	the organization an	iswerea res on Fa	rm 990, Part IV. 11	ne 18, or reported
		more than \$15,000 of fundraising List events with gross receipts gi	event contributions	and gross income	on Form 990-EZ,	lines 1 and 6b.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Annual Meeting		None	(add column (a) through column (c))
RE			(event type)	(event type)	(total number)	
REVENUE	1	Gross receipts	16,195.			16,195.
E	2	Less Contributions				
	3	Gross income (line 1 minus line 2)	16,195.			16,195.
	4	Cash prizes				
	5	Noncash prizes				
D I R E C T	6	Rent/facility costs				
	7	Food and beverages	2,980.			2,980.
EXPENSES	8	Entertainment				
N S E	9	Other direct expenses	528.			528.
	10	Direct expense summary Add lines 4 th	rough 9 in column (d)		•	3,508.
		Net income summary Subtract line 10 f			•	12,687.
Part	kIII)	Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Yes	s' on Form 990, Par	t IV, line 19, or re	ported more than
				(b) Pull tabs/instant		(d) Total gaming
RE			(a) Bingo	bingo/progressive	(c) Other gaming	(add column (a) through column (c))
RE>ENUE				bingo	,	through column (c))
Ď						
	1	Gross revenue				
E	2	Cash prizes				
D I P E N C T E	3	Noncash prizes				
Č S T E S	4	Rent/facility costs				
	5	Other direct expenses				
			Yes%	Yes%	Yes %	72 FATTS
	6	Volunteer labor	No	No	No	
	7	Direct expense summary Add lines 2 th	rough 5 in column (d)		•	
	8	Net gaming income summary Subtract	line 7 from line 1, colum	n (d)	•	

9 Enter the state(s) in which the organization conducts gaming activities		
a Is the organization licensed to conduct gaming activities in each of these states?	Yes	No
<b>b</b> If 'No,' explain		
<ul><li>10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?</li><li>b If 'Yes,' explain</li></ul>	Yes	No

BAA

Scne	edule G (Form 990 or 990-EZ) 2017 Montana Conservation Voters Inc.	81-0521030	)	Page 3
11	Does the organization conduct 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			
	administer charitable gaming?	□'	Yes	No
13	Indicate the percentage of gaming activity conducted in	1 1		
	a The organization's facility	13a		%
	b An outside facility	13b		
	Enter the name and address of the person who prepares the organization's gaming/special events books and recor	ds		
	Name •			
	Address ►			
15			٦.,	<b>—</b>
152	a Does the organization have a contract with a third party from whom the organization receives gaming rever	L	Yes	No
		the amount		
,	of gaming revenue retained by the third party \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
•	, in res, enter hand address of the tillid party			
	Name •			
				· [
	Address			
16	Gaming manager information			
	Name •		- <b></b> -	
	Gaming manager compensation ► \$			
	Description of services provided	<b>. – –</b> – – –	. <b>_</b>	
	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		٦٧	□ <b></b> .
	state garming license?		Yes	No
•	organization's own exempt activities during the tax year > \$			
Pai	Supplemental Information. Provide the explanations required by Part I, line 2b, of and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information. See instructions.	olumns (III) any additiona	and (	v);

TEEA3703L 09/18/17

Schedule G (Form 990 or 990-EZ) 2017

BAA

#### **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.

► Go to www.irs gov/Form990 for the latest information.

Open to Public Inspection

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

81-0521030

Form 990, Part III, Line 1 - Organization Mission

Montana Conservation Voters Inc.

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

Outreach and Community Organizing: Over the summer of 2017, MCV launched a door to door fundraising canvass. We knocked 16,761 doors, secured 2,504 petition signatures of which 1,734 had good e-mails, and raised \$60,450 renewing 414 members and capturing 1,120 new members. This campaign was focused on transitioning from dirty coal and moving Montana toward a cleaner more renewable energy future based on rooftop solar, backyard wind and large-scale wind farms. The campaign captured comments to Montana's U.S. Senators urging them to oppose President Trump's budget cutting 31% from EPA's budget and slashing the Land and Water Conservation Fund and to restore funding for EPA's climate change programs.

MCV's four chapters, Yellowstone County, Gallatin-Park County, Missoula County and Flathead County each convened membership meetings attended by an individual low of 20 members and a high of 80. Chapter boards meet approximately nine times per year.

Total expense: \$566,794

### Form 990, Part III, Line 4b - Program Service Accomplishments

Conservation Policy Campaign: MCV's 2017 Conservation Policy Campaign was dedicated

Employer identification number

81-0521030

#### Form 990, Part III, Line 4b - Program Service Accomplishments

Energy Blueprint and Public Lands Agenda. Specific areas of work in 2017 included:

- 1) Working with the Bullock Administration to implement the public lands agenda which included the onboarding of a public access specialist within the Department of Natural Resources & Conservation, a new Office of Outdoor Recreation within the Office of the Governor, and restoring the Habitat Montana so it could acquire land to increase access to public lands, streams, and rivers.
- 2) Working with the newly elected 2017 Montana State Legislature to educate them about pending proposals to advance clean, renewable energy and energy efficiency, public lands protection, as well as clean water laws and measures to ensure broad-based citizen participation, while opposing roll backs.
- 3) Opposing proposals to transfer federal lands to the state as well as the dedication of any state funds to study this.
- 4) Continuing work during the 2017-2018 interim legislative period by testifying before the Interim Energy and Telecommunications Interim Committee regarding clean energy policies.
- 5) Coordination of meetings of the Conservation Working Group, a coalition of groups organized to advocate for strong environmental policies post-election and pre-session to establish legislative policy priorities.
- 6) Recruiting and securing appointments of conservation and environmental group leaders to openings on relevant local and statewide boards and commissions.

Accomplishments included lobbying and accountability work at the 2017 legislature to enact proactive, positive conservation policy that included clean energy, public lands, and reducing greenhouse gas emissions. Additional legislative preparation included defensive efforts to defeat legislation that would have rolled back net

#### Form 990, Part III, Line 4b - Program Service Accomplishments

metering laws in Montana, eliminated the Board of Environmental Review, increased taxes on electric vehicles and alternative fuels, and prevented public input on renewing the lease for a proposed new coal mine in southeastern Montana. Preparing for these accomplishments were achieved with the support of the Conservation Working Group, comprised of 13 allied organizations.

As it does each year, MCV released the national League of Conservation Voters' Congressional Scorecard in February 2017 with a press release and earned media efforts in the statewide and local press. MCV also completed rigorous social media and digital efforts to disseminate the message to a broad audience.

At the federal level, MCV advocated passage of a funding for the EPA and clean energy programs at DOE as well as range of public lands policies including full funding and permanent reauthorization for the Land and Water Conservation Fund and protection of the Antiquities Act. MCV also continued its work to defend the Clean Air Act and advocate for aggressive carbon reduction goals under the Clean Power Plan. Staff travelled to Washington, DC to lobby Senator Tester and his staff as well as staff for Senator Daines.

In the summer and fall of 2017, MCV chapter leaders and staff prepared non-partisan questionnaires mailed to candidates running for the statewide, legislative, and local offices and invited them to participate at chapter membership meetings. MCV also communicated with members about what was at stake in the 2017 local municipal elections and provided voter information to residents of these communities about the environmental positions of those who responded to questionnaires.

Employer identification number

81-0521030

#### Form 990, Part III, Line 4b - Program Service Accomplishments

Total Expense: \$67,857

#### Form 990, Part III, Line 4c - Program Service Accomplishments

Leadership and Staff Development:

MCV staff and board members attended the national League of Conservation Voters/LCV Education Fund training meeting in Philadelphia; staff attended a fundraising training in Seattle; staff attended the Ballot Initiative Service Center; and staff took training to learn how to effectively utilize MCV's new database.

Ongoing staff development included participation in monthly League of Conservation Voters Development Director calls, Political Director calls, monthly organizing calls and participation at LCV's Executive Director meeting which included a staff development component. MCV staff carried out their professional development plans including legal compliance issues, civic engagement, environmental policy and fundraising skills.

Our Field Director began the League of Conservation Voters Leadership Development Cohort which identifies leadership style and readiness surveys, seeks feedback from fellow staff and subordinates on leadership performance to date and works with a life coach to identify areas for further improvement in leadership in the future Conservation Voter Movement.

Total expense: \$18,839

#### Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

Montana Conservation Voters has individual members. There is not a set membership fee. Membership dollars are included with contributions on the F990.

Schedule 6 (Form 990 of 990-E2) (2017)					
Name of the organization	Employer identification number				
Montana Conservation Voters Inc.	81-0521030				

## Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

MCV has individual members who annually elect members of the Board of Directors.

#### 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 12c - Explanation of Monitoring and Enforcement of Conflicts

At its meetings, the board regularly monitors and enforces the conflict of interest policy.

## Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Board performs an annual review at an Executive Committee meeting before any salary adjustment is given to Executive Director.

#### 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 orientation session. This manual is also available to all MCV members upon request. The organizational manual is also available to chapter boards upon request.

#### Form 990, Part IX, Line 11g Other Fees For Services

		(A)	(B)	(C)	(D)
		Total	Program <u>Services</u>	Management <u>&amp; General</u>	Fund- <u>raising</u>
Canvass Consulting	Total \$	500,779. 500,779.	499,429. \$ 499,429.	1,350. \$ 1,350.	\$ 0.

#### Form 990, Part XII, Line 1 - Other Accounting Method

Modified Cash

#### **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.

Department of the Treasury Internal Revenue Service	► Go to www irs gov/Form990 for instructions and the latest information											Open to Public			
Montana Conservation Voters Inc										oyer (dentification number -0521030					
Part   I   Identification	of Disregarded Entities.	Complete if the organiz	ation ansv	vered 'Ye	s' on Forn	n 990	, Part IV, line	33			·				
Name, address, and	ntity Primary a	activity	(c) Legal domicile (state or foreign country)		(d) Total income		(e) End of year asset		sets Direct c		(f) t controlling entity				
(1)															
(2)										-					
(3)											<del></del>				
Part II Identification	of Related Tax-Exempt O	 rganizations. Complete	e if the ord	anization	answere	d 'Yes	s' on Form 99	0, Part	IV, line 34	becau	ıse ıt				
had one or m	ore related tax-exempt org	anizations during the t	tax year		,						,				
Name address, and	(a) EIN of related organization	<b>(b)</b> Primary activity	Legal dom	c) ncile (state n country)	(d) Exempl ( section		(e) Public charity (if section 501	status (c)(3))	<b>(f)</b> Direct contr e⊓tity	olling	Sec 512 controller	<b>j)</b> (b)(13) d entity?			
(A) W			<u> </u>								Yes	No			
PO Box 853	vation Voters Educat	Research and education to MT _conservtion		ΛΤ	501 (	c) 3 _	501 (c)	3	N/A			Х			
(2)															
(3)										<del></del>					

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

TEEA5001L 11/29/17

Schedule R (Form 990) 2017

OMB No 1545 0047

2017

TEE A5002L 11/29/17

Schedule R (Form 990) 2017

BAA

Part V: Transactions With Related Organizations. Complete if the organization answered 'Ye	es' on Form 990. Part IV	line 34 35h or 3			age 3						
	S OIT OITH 990, Fait IV.	ine 34, 330, or 30	<del></del>								
Note Complete line 1 if any entity is listed in Parts II, III or IV of this schedule  1 During the tax year, did the organization engage in any of the following transactions with one or more related organization.	denne beted in Onda II IV/2		7.79	Yes	No triots/3						
	allons listed in Parts II (V)		200023512	87000							
a Receipt of (i) interest, (ii) annuities, (iii) royalties or (iv) rent from a controlled entity			1 a		<u>X</u>						
b Gift, grant or capital contribution to related organization(s)											
c Gift, grant, or capital contribution from related organization(s).											
d Loans or loan guarantees to or for related organization(s)			1 d		X						
e Loans or loan guarantees by related organization(s)			1 e	5410×4/11/.A	X						
f Dividends from related organization(s)			1 f								
g Sale of assets to related organization(s)			1 q		X						
h Purchase of assets from related organization(s)			1 h		X						
Exchange of assets with related organization(s)			11								
Lease of facilities, equipment, or other assets to related organization(s)					X						
The case of facilities, equipment, of other assets to related organization(s)			1 J		X						
k Lease of facilities, equipment, or other assets from related organization(s)			1 k		X						
Performance of services or membership or fundraising solicitations for related organization(s)			11		X						
m Performance of services or membership or fundraising solicitations by related organization(s)			1 m		X						
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1 n		x						
o Sharing of paid employees with related organization(s)			10		X						
U Sharing of paid employees with related organization(s)			67224	1500/11/16	<u>^</u>						
p Reimbursement paid to related organization(s) for expenses			1 p	R. College	X						
Reimbursement paid by related organization(s) for expenses			19	х							
				<b>333</b>	W. 100						
r Other transfer of cash or property to related organization(s)			1 r		X						
s Other transfer of cash or property from related organization(s)			1 s		X						
2 If the answer to any of the above is 'Yes, see the instructions for information on who must complete this line, including	g covered relationships and tran	saction thresholds									
(a) Name of related organization	(b)	(c)	Method of	)							
Name of related organization	Transáction type (a-s)	Amount involved	Method of amount	determ	nning ed						
	3pc (c s)										
(1) Montana Conservation Voters Education Fd		40,000	Cach								
() Montana Conservation voters Education ru		40,000	Casii								
		260 000									
(2) Montana Conservation Voters Education Fd	p	360,870	Cost Al	Loca	110						
(3)			<b>├</b> ──								
(4)			ļ								
(5)											
(6)			<u> </u>								
BAA TEEA5003L 11/29/17		Sched	ule <b>R</b> (Forr	n 990)	2017						

## Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered 'Yes' on Form 990, Part IV, line 37

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	l lated, excluded	(e) Are all partners section S01(c)(3) organizations?		Share of total income	(g) Share of end of year assets	(h) Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			from tax under sections 512 514)	Yes	No			Yes	No	( 5 1555)	Yes	No	İ
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
<u></u>													
(8)													
BAA		<u> </u>	<u>I</u>	EA5004L	08/09/1	7	<u> </u>	<u> </u>	l	Schedu	le R (	orm 9	90) 2017

TEEA5004L 08/09/17

Schedule **R** (Form 990) 2017

Schedule R (Form 990) 2017 Montana Conservation Voters Inc. 81-05210:

| Supplemental Information. | Provide additional information for responses to questions on Schedule R. See instructions.