

OMB No 1545 0047 2017

Department of the Treasury Internal Revenue Service

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

Α	For th	ne 2017 calen	dar year, or tax year beginning , 2017, and ending		,		
В	Check I	if applicable	C	D Employer Ider	tification number		
	Пас	ddress change	Montana Conservation Voters Education	81-0525	5336		
	H_{Na}	ame change	Fund	E Telephone nur			
	\vdash	itial return	PO Box 853	(406)	254-1593		
	\vdash	nal return/terminated	Billings, MT 59103	(400)	234-1393		
	H-1				¢ 441 004		
	\vdash	mended return	F Name and address of principal officer H(a	G Gross receipts	107		
	∐ Ap	oplication pending	1	Is this a group return for si	L_1163 E-1160		
		·····	Same As C Above	Are all subordinates includ If 'No,' attach a list (see in	ed? Yes No istructions)		
<u> </u>		exempt status	X 501(c)(3) 501(c) ()				
J	Wel	bsite: ► ww		Group exemption number	<u> </u>		
K		of organization	X Corporation	1999 M State of	legal domicile MT		
Pa	rt I	Summar	y				
	1	Briefly descri	be the organization's mission or most significant activities. To provide	research and p	oublic		
يە			n to the members of Montana conservation and env		ganizations		
2			rs interested in protecting Montana's clean air	<u>and water, wi</u>	ldlife,		
Ē			nd open space.				
ŏ		Check this bo	L	1 -	sets.		
ভ			oting members of the governing body (Part VI, line 1a)	3	6		
S			dependent voting members of the governing body (Part VI, line 1b) of individuals employed in calendar year 2017 (Part V, line 2a)	4	6		
ŧ			of individuals employed in calendar year 2017 (Fart V, line 2a) of volunteers (estimate if necessary)	5	0		
Activities & Governance			ed business revenue from Part VIII, column (C), line 12	6 7a	240		
•			I business taxable income from Form 990-T, line 34	7 <u>a</u> 7b	0.		
			- Submission (analysis months) and submission (analysis)	Prior Year	Current Year		
	8	Contributions	and grants (Part VIII, line 1h)	363,738.	436, 699.		
Revenue	1		and grants (Part VIII, line 1h) //ice revenue (Part VIII, line 2g) RECEIVED	303,130.	430,033.		
Ę		_	scome (Part VIII, column (A), lined 104, and 7d)	1,531.	5,225.		
æ	11	Other revenu	e (Part VIII, column (A), lines 5, 6th 48c, 9d/10/c, and 12/18	1,331.	3,223.		
			e – add lines 8 through 11 (must equal Part VIII, column (A), line (2)	365,269.	441,924.		
_			imilar amounts paid (Part IX, column (A) inges 1-3)	25,000.	111/521.		
			to or for members (Part IX, column (A) (A) E)	25,000.			
	1		er compensation, employee benefits (Part IX, column (A), lines 5-10)	200,735.	286,233.		
စ္			fundraising fees (Part IX, column (A), line 11e)	200,133.	200,233.		
Expenses	l		 				
្តន	1		sing expenses (Part IX, column (D), line 25) 103,730.				
-	1		ses (Part IX, column (A), lines 11a-11d, 11f-24e)	170,610.	187,313.		
	1		es. Add lines 13-17 (must equal Part IX, column (A), line 25)	396,345.	473,546.		
	19	Revenue less	expenses. Subtract line 18 from line 12	-31,076.	-31,622.		
8 8				leginning of Current Year	End of Year		
10 10			(Part X, line 16)	138,978.	107,356.		
₹2	21	Total liabilitie	s (Part X, line 26)	0.	0.		
25	22	Net assets or	fund balances. Subtract line 21 from line 20	138,978.	107,356.		
Pa	rt II	Signatur	e Block				
Unde	r penali	ties of perjury, I de	eclare that I have examined this return, including accompanying schedules and statements, and to the b res (other than officer) as based on all information of which preparer has any knowledge	est of my knowledge and be	lief, it is true, correct, and		
com	olete De	eclaration of prepa	(other than officer) is based on all information of which preparer has any knowledge		<i></i>		
		▶ √ <i>k</i>	do-Sil	<u> </u>	118		
Sig	jn 💮	Signatu	tre of officer	Date			
He	re	.	Robin Jaha Chair				
			print name and title				
		Print/Type p	preparer's name Preparer's signature Date	Check T	PTIN		
Pa	id	المحل	white 8/11	self-employed	P00821884		
	epare	Firm's name	DARCI HERTZ				
	e On			Firm's EiN ► 45	4884304		
		- 1	BILLINGS, MT 59104		-690-2427		
May	the I	RS discuss th	is return with the preparer shown above? (see instructions)	1 2 2 2 2 200	X Yes No		
_				13L 08/08/17	Form 990 (2017)		

	990 (2017)		81-0525336				
Par	閉り State	ement of Program Service Accomplishments					
	Check	k if Schedule O contains a response or note to any line in this Part III					X
1	Briefly descr	ribe the organization's mission					
	See Sche	edule 0					
	-		. – – –				
		·				- - -	
2	Did the organ	nization undertake any significant program services during the year which were not listed on the prior					
	Form 990 or	990-EZ?		П	Yes	X	No
	If 'Yes,' desc	cribe these new services on Schedule O.					
3	Did the orga	inization cease conducting, or make significant changes in how it conducts, any program service	ces?	П	Yes	X	No
	If 'Yes,' desc	cribe these changes on Schedule O.					
4	Describe the	e organization's program service accomplishments for each of its three largest program service (c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations t	s, as n	neasure	d by e	xpens	es.
	Section 501	(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	o other	s, the t	otal e	pens	ŧs,
	and revenue	e, if any, for each program service reported.					
) (D		<u>^</u>			
4 a	(Code) (Expenses \$ 178,382. including grants of \$) (Rev	/enue	۶			— ⁾
	See Sche	<u>edule_0</u>					
							- -
			- 				
41	(Code) (Expenses \$ 106, 225. including grants of \$) (Rev	venue	\$)
	See Sche						<u> </u>
	266_2016	24416 -0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-					. — — —
	-						
							- – –
4	c (Code.) (Expenses \$15,555. including grants of \$) (Ref	venue	\$)
	Leaders	hip and Staff Development: MCVEF staff and board members a	tten	ded t	he		
	nationa	l League of Conservation Voters/LCV Education Fund training	mee'	ting	in		. – – -
		lphia; staff attended a fundraising training in Seattle; st				i	. – – -
		attended a public policy and advocacy training sessions in					
		ttended the Ballot Initiative Service Center; and staff per					. – – -
		g to learn how to effectively utilize MCVEF's database.	<u> </u>		2		- -
	CTGTIITI	ig to really now to cricectively defined moving a decapable.					· -
	Total						- -
	Torat e	expense: \$15,555	-				- - -
							- -
4		ram services (Describe in Schedule O.) See Schedule O					
	(Expenses	\$ 13,832. including grants of \$) (Revenue \$)	
4	e Total progra	am service expenses ► 313,994.					

much .	And the second s		Vaal	N _a
_		$\overline{}$	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	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		<u>x</u>
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	Х	
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		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II .	7		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		X
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		X
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	7007///7 T-5/40	X
17	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			一 斯 第4
i	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 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		X
•	bild 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		X
	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
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		x
	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
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
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	14Ь		X
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		X
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		X
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		X
	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		X
3A/	TEEA0103L 08/08/17	Form	1 990	(2017)

	1990 (2017) Montana Conservation Voters Education	81-0525336	Р	age 4
Pa	Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H .	20a		Х
ŧ	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 of domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	or 21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals of column (A), line 2 ⁹ If 'Yes,' complete Schedule I, Parts I and III	on Part IX,		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	current 23		х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24c complete Schedule K. If 'No, 'go to line 25a	l and 24a		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to de any tax-exempt bonds?	fease 24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess beneficially with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	efit 25a		х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior ye that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' comp Schedule L, Part I	ar, and olete 25b		х
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current former officers, directors, trustees, key employees, highest compensated employees, or disqualified pers	ons? 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 memory of any of these persons? If 'Yes,' complete Schedule L, Part III	mber 27	1 to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	X
	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) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
		200	 	
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	286		х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) wa officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	s an 28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	1 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified contributions? If 'Yes,' complete Schedule M	conservation 30		X
31		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 sec 301.7701-2 and 301.7701-37 If 'Yes,' complete Schedule R, Part I	ctions 33		х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, and Part V, line 1	III, or IV,	х	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35 a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a contribution of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	ontrolled 35t	,	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable re organization? If 'Yes,' complete Schedule R, Part V, line 2.	lated 36	x	

38 BAA

37

38

Х

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 . . .

Form 990 (2017) Montana Conservation Voters Education 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

	Check if Schedule O contains a response or note to any line in this Part V				П			
				Yes	No			
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	1					
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0					
c	Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eportable gamıng	1 c	X				
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	0					
b	If at least one is reported on line 2a, did the organization file all required federal employment		2 b		-			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in	•						
	Did the organization have unrelated business gross income of \$1,000 or more during the year	۲۶	3 a		<u> X</u>			
	off 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3Ь		 			
	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 financial account the page of the foreign country.	er authority over, a nancial account)?	4 a		X			
D	olf 'Yes,' enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts (FRAD)	$\exists ss$	1.5				
5 -	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	•	5 b		X			
	; If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	Si transaction	5 c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, a	nd did the organization						
	solicit any contributions that were not tax deductible as charitable contributions?		6 a		Х			
	olf 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?	ions or gitts were	6 b					
	Organizations that may receive deductible contributions under section 170(c).			4				
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?							
	o If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it is Form 8282?		7с		\\ \(\) \(
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d						
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		7 e					
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben		7 f					
•	If the organization received a contribution of qualified intellectual property, did the organization file as required?		7 g					
	 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained 		7 h	**************************************				
•	organization have excess business holdings at any time during the year?	by the sponsoning	8					
9	Sponsoring organizations maintaining donor advised funds.							
	a Did the sponsoring organization make any taxable distributions under section 4966?		9 a	esululusiis.				
ŧ	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related per	son?	9 Б					
	Section 501(c)(7) organizations. Enter		39%	. S	4.4			
ä	a Initiation fees and capital contributions included on Part VIII, line 12	10a						
ŀ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			¥			
11	Section 501(c)(12) organizations. Enter:		1					
	a Gross income from members or shareholders	11 a						
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b						
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		12 a					
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12b						
	Section 501(c)(29) qualified nonprofit health insurance issuers.		13	13 M				
ā	a Is the organization licensed to issue qualified health plans in more than one state?		13a					
	Note. See the instructions for additional information the organization must report on Schedul	e o.						
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	136						
	c Enter the amount of reserves on hand	13c			480			
	${f a}$ Did the organization receive any payments for indoor tanning services during the tax year? .		14a		X			
_ 1	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O .	14b					
AA	TEEA0105L 08/08/17		Form	990	(2017)			

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

Sec	tion A. Governing Body and Management					
					Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members	1 a				
	of the governing body, or if the governing body delegated broad					
h	authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent	1 ь				
	Did any officer, director, trustee, or key employee have a family relationship or a business relations	لتبسا	h any other	47.81		
_	officer, director, trustee, or key employee?	p *****	ir any outer	2		X
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors, or trustees, or key employees to a management company or other pers	ne direc	ct supervision	3	Ì	Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		
5	Did the organization become aware during the year of a significant diversion of the organization	ion's a	assets?	5		$\frac{X}{X}$
6	Did the organization have members or stockholders?			6	-	X
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or a members of the governing body?	ppoint	one or more	7 a		x
ŀ	Are any governance decisions of the organization reserved to (or subject to approval by) mei	mbers				
	stockholders, or persons other than the governing body?		,	7Ь		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken the following: $\frac{1}{2} \int_{\mathbb{R}^{n}} \frac{1}{2} \left(\frac{1}{2} \int_{$	during	the year by			
á	The governing body?			8 a	Х	
	Each committee with authority to act on behalf of the governing body?			8Ь	X	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannorganization's mailing address? If 'Yes,' provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not req	uirea	l by the Internal R	evenu		de.)
					Yes	No
	a Did the organization have local chapters, branches, or affiliates?			10 a		X
ı	• If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, operations are consistent with the organization's exempt purposes?.	and brai	nches to ensure their	10Ь		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			11 a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990). S	ee Schedule O		12.35	15
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13			12a	Х	
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that to conflicts?			12b	Х	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If " Schedule O how this was done See Schedule O	Yes,' d	lescribe in	12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14				14	Х	
15	Did the process for determining compensation of the following persons include a review and approximation, comparability data, and contemporaneous substantiation of the deliberation and de					
	a The organization's CEO, Executive Director, or top management official See Schedule	e 0.		15a	Х	
I	b Other officers or key employees of the organization			15b		Χ
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).					3
16:	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar taxable entity during the year?	arran	gement with a	16 a		X
	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?		eguard the	16b		• 14.3
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed None		- 			
18	for public inspection. Indicate how you made these available. Check all that apply.		0-T (Section 501(c)(3): plain in Schedule O)	s only)	avaıla	ble
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p	•		able to		
20	the public during the tax year. See Schedule O					
_0	The Organization 2822 3rd Avenue N Ste 203 Billings MT 5			3		

Form 990 (20	017) Mon	tana Con	servation	Voters	Education
1 01111 220 (21	ווטויים ליויי	tana con	SELVALIUN	AOLETS	Euucacion

81-0525336

ane 7

PartVIII 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.

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

Check this box in heither the organization nor any relati				(C)						
(A) Name and Title	(B) Average hours per	thar	one both dır	box, an o ector	unles fficer trusti		on	(D) Reportable compensation from	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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)	(W-2/1099-MISC)	from the organization and related organizations
(1) Matt Rinella	3									
Treasurer	0	X		X				0.	0.	0.
(2) Nicola Preston Secretary	1	х		X				0.	0.	0.
(3) Jeanne-Marie Souvigney	2									
Director	0	X				<u> </u>		0.	0.	0.
(4) Addison Sessions	2									_
Director	0	Х			<u>. </u>	-	_	0.	0.	0.
(5) Robin Saha	3	Ų,		v				,	0	0
Chairman (6) Clayton Elliott	22	X		Х		-	-	0.	0.	0.
Executive Director	$-\frac{22}{18}$	1		ļ	x			46,697.	38,303.	0.
()					,			40,057.	30,303.	
(8)		-								
<u>(9)</u>		-					-			
(10)										
(11)		1								
(12)										
(13)			Γ							
(14)										<u> </u>

Part VII Section A. Officers, Directors, 1		tey i	Em			es, a	ınu	Highest Con	ipensated Empi	oyees (continuea)
(A) Name and title	Average hours	box,	unles	s pe	ition more	than o	an	(D) Reportable	(E) Reportable	(F) Estimated
	per week (list any hours for related organiza tions below dotted line)	\vdash				Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(15)								-	. =	
(16)			7					-		
(17)										
(18)		1	1							
(19)										
(20)			_							
(21)										
(22)										
(23)		-								
(24)								<u> </u>		-
(25)									***	
1 b Sub-total			+				>	46,697.	38,303.	0.
c Total from continuation sheets to Part VII, Se	ection A						▶	0.	0.	0.
d Total (add lines 1b and 1c)						<u></u>	>	46,697.	38,303.	0.
2 Total number of individuals (including but not lim from the organization ▶ 0	ited to those	listed	abov	/e) \	who	recer	ved	more than \$100,00	00 of reportable comp	pensation
3 Did the organization list any former officer, di on line 1a? If 'Yes,' complete Schedule J for s	rector, or tru such individu	ıstee, ıal	key	em	nplog	yee,	or h	ighest compensa	ted employee	Yes No
4 For any individual listed on line 1a, is the sum the organization and related organizations gre such individual	n of reportab eater than \$1	le cor 50,00	npei 107	nsa If '\	tıon Yes,	and com	othe	er compensation te Schedule J for	from	4 X
5 Did any person listed on line 1a receive or act for services rendered to the organization? If '	crue comper	satio	n fro	om a	any I fo	unre	late	d organization or erson	individual	5 X
Section B. Independent Contractors	,,				-					
1 Complete this table for your five highest components on from the organization. Report components of the components	ensated ind pensation for	epend the ca	ient alend	cor dar	ntrac year	tors end	that ng v	t received more the outling the o	nan \$100,000 of rganization's tax yea	r.
(A) Name and business a	address							Description) of services	(C) Compensation
Total number of independent contractors (including \$100,000 of compensation from the organization)		nted to	o tho	se	liste	d abo	ve)	who received more	e than	
RAA	···· U	TEFAN	11001	08/	ng/17					Form 990 (2017)

Form **990** (2017)

BAA

1/41 11.5	1104	Check if Schedule O	contains a resp	onse or note to any	y line in this Part VI	11		
: mj				4.	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
Program Service Revenue and Other Similar Amounts	b c d e f		rants, and above 1 f	436, 699. Business Code	436,699.	revenue		512-514
Prog	g	All other program service Total. Add lines 2a-2f	e revenue.	-	•	Land		
Other Revenue	3 4 5	Investment income (incl other similar amounts) Income from investmen Royalties	_	. •	5,225.	5,225.		
	7 a	a Gross rents. b Less rental expenses c Rental income or (loss) d Net rental income or (loss) a Gross amount from sales of assets other than inventory b Less, cost or other basis and sales expenses.	(i) Real	(II) Personal				
	8 8	c Gain or (loss). d Net gain or (loss) a Gross income from fund (not including \$		a b				
	9 a	c Net income or (loss) from a Gross income from gan See Part IV, line 19 b Less: direct expenses c Net income or (loss) from a Gross sales of inventor and allowances b Less cost of goods sol	oning activities. om gaming activities. y, less returns	a b	-			
	11:	Miscellaneous Reventation Miscellaneous Reventation All other revenue	nue	Business Code				
	1	e Total. Add lines 11a-11 Total revenue. See ins			441.924	5.225	0.	0.

TEEA0109L 08/08/17

Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX X (A) Total expenses (D) Do not include amounts reported on lines Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21. Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members Compensation of current officers, directors. 8.954 25,144 12,583 trustees, and key employees 46,681 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) n 0 62,595 Other salaries and wages 194,275 111,569 20,111 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) <u>8</u>74 1,751. 3,708 6,333 2,630 5,335. Other employee benefits 18,973. 11,008 6,044. 10 Payroll taxes 19,971 11,273 2,654 11 Fees for services (non-employees): a Management **b** Legal 7,017 c Accounting 4,080 1,296 1,641 d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0 \$GD 1,350 68,728 67,378 Advertising and promotion 9,693. 9,642 51 13 Office expenses 1,561 269 960 332. 9,592 709 4,268 1,615. Information technology 14 Royalties. 15 7,656. 1,858 2,994. Occupancy 12,508 16 1,420 2,914. 9,168 4,834 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 7. 19 Conferences, conventions, and meetings 2,464 2,457. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 797 23 1,638. 689. 152 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 40,000 40,000 a Grants to Others 432 <u>869.</u> 5,693 b Printing and Publications 6,994 6,299 6,299. c Events/Canvass <u>446.</u> 3,306 1,301 5,053 d Dues/Registrations_ 1,579. 3,882 1,137. e All other expenses 6,598. 313,994 55,822. 103,730. 25 Total functional expenses. Add lines 1 through 24e 473,546. 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) Form 990 (2017) BAA TEEA0110L 08/08/17

	JE-2	Check if Schedule O contains a response or note to any line in	this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		13,853.	1	25,972.
	2	Savings and temporary cash investments.		98,185.	2	49,689.
ı	3	Pledges and grants receivable, net.			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directrustees, key employees, and highest compensated employees. CPart II of Schedule L	ectors, Complete		5	业和为 为200000000000000000000000000000000000
	6	Loans and other receivables from other disqualified persons (as a section 4958(f)(1)), persons described in section 4958(c)(3)(B), and a employers and sponsoring organizations of section 501(c)(9) voluntary beneficiary organizations (see instructions). Complete Part II of S	ontributing / employees'		6	
9	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	14,500.	ar ilij		《
	b	Less accumulated depreciation 10b	14,500.		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		26,940.	15	31,695.
l	16	Total assets. Add lines 1 through 15 (must equal line 34)		138,978.	16	107,356.
	17	Accounts payable and accrued expenses			17	
l	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
.e	21	Escrow or custodial account liability. Complete Part IV of Sched			21	
Liabilities	22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualifie Complete Part II of Schedule L	s, trustees, d persons.		22	
_	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 and other liabilities not included on lines 17-24). Complete Part 3	d third parties, X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
ses		lines 27 through 29, and lines 33 and 34.	and complete			
	27	Unrestricted net assets .		112,037.		80,415.
Bal	28	Temporarily restricted net assets.		4,941.	28	4,941.
豆	29	Permanently restricted net assets		22,000.	29	22,000.
or Fund Bala		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.				
ş	30	Capital stock or trust principal, or current funds		30		
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
As	32	Retained earnings, endowment, accumulated income, or other fu	ınds		32	
Net Assets	33	Total net assets or fund balances		138,978.	33	107,356.
_	34	Total liabilities and net assets/fund balances		138,978.	34	107,356.
BA	A					Form 990 (2017)

		81-0525336	Pa	ge 12
Par	tXIX 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	441,9	
2	Total expenses (must equal Part IX, column (A), line 25)	2	473,5	46.
3	Revenue less expenses. Subtract line 2 from line 1	3	- 31,6	22.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	138,9	178 <u>.</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities .	6	. <u> </u>	
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<u>_</u>	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	107,3	<u> 356.</u>
Pa	TXII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			X
	Accounting method used to prepare the Form 990 Cash Accrual X Other See Sch	•	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 Were the organization's financial statements compiled or reviewed by an independent accountant?	. 0	2a X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis	newed on a	4 4 4	A
	b Were the organization's financial statements audited by an independent accountant?		2b X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a set basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis	eparate		
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	1-		
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?		3 a	Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	36	
=-	or audits, explain why in Schedule O and describe any steps taken to undergo such audits .		3 b Form 990	(2017)
BA	4		1 01111 330	(4017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545-0047



Name o	f the	organization		Con	servatio	n Vot	ers Edu	cation			Employer identi	
7///*	40 80	D	Fund	01	'L CL.	/AII					81-05253	
A PROPERTY.	V/ANTERNA	<u> </u>	not a private								part.) See instru	actions.
1 1	iiga 		convention of a			•		•		•	•	\sim
2	Н	,	escribed in se						•		<i>)</i> ·	\cup
3	Н		or a coopera			•					Viii	
4	Н	'	•		•	-					• • •	. Enter the hospital's
7			, and state		·							
5		An organiz	zation operati '0(b)(1)(A)(iv)	ed for t). (Con	he benefit of oplete Part II	a colleg	ge or univei	rsity owned o	or opera	ted by a	governmental unit	described in
6	L	A federal,	state, or loca	al gove	nment or go	vernme	ntal unit de	scribed in s e	ection 1	70(b)(1)	(A)(v).	
7	X	An organiza	ation that norr 1 70(b)(1)(A)	mally re (vi). (C	ceives a subs omplete Par	stantial p † II.)	art of its sup	port from a o	governme	ental uni	t or from the general	public described
8		A commun	nity trust desc	cribed i	n section 17	'0(b)(1)(A)(vi). (Con	nplete Part II	l.)			
9			y or a non-lar								on with a land-grant co and state of the colleg	
10		from activi	ities related t	o its ex Lunrela	rempt function tended to the second tended to the second tended to the second tended tended to the second tended t	ons –sub s taxable	oject to cert e income (le	ain exceptio	ns, and	(2) no n	membership fees, ar nore than 33-1/3% o sinesses acquired b	nd gross receipts If its support from gross If the organization after
11		An organiz	zation organi	zed and	d operated e	xclusive	ly to test fo	r public safe	ty. See	section	509(a)(4).	
12		or more pi	ublicly suppo	rted or	ganizations o	describe	d ın sectıo ı	n 509(a)(1) o	r sectio	n 509(a)	ctions of, or to carry (2). See section 50 9 es 12e, 12f, and 12d	out the purposes of one 3(a)(3). Check the box in
а		Type I. A si organizatio	upporting orga	anization r to req	n operated, si ularly appoint	upervise	d, or control	led by its sup	ported or	rganizati	on(s), typically by giv he supporting organiz	ing the supported
Ь		Type II. A	supporting o	rganıza orting o	ation supervisorganization v	rested in	ontrolled in the same po	connection ersons that co	with its sontrol or	supporte manage	ed organization(s), b the supported organiz	y having control or zation(s). You
c		Type III fur organizati	ictionally integon(s) (see in	grated. structio	A supporting ons) You mu	organizat I st com j	ion operated plete Part IV	I in connection /, Sections /	n with, an	id functio	onally integrated with,	its supported
d		functional	n-functionally ly integrated. is). You mus	The or	ganization q	enerally	must satis	fy a distribut	nection in requ	with its s irement	supported organization and an attentivenes	n(s) that is not ss requirement (see
е		Check this	•	rganiza	tion received	d a writte	en determin	ation from t	he IRS ti	hat it is	a Type I, Type II, Ty	pe III functionally
f	Εr	-	nber of suppo		-	_	5	J	•			
g	Pi	rovide the fo	ollowing infor	mation	about the su	upported	organizati	on(s).				
	(i) N	ame of support	ed organization		(ii) EIN		(described	organization on lines 1-10 instructions))	(iv) li organizat in your g docun	on listed	(v) Amount of monetar support (see instruction:	
						!			Yes	No		
									103	-110		-
(A)												
(B)_												
(C)					<u> </u>							
(D)												
(E)								* · · · · * · · // // · · · · · · ·		,		
Tota	j					ing .				jerije stoj ppo sost		

Part III Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sect	ion A. Public Support					<u></u>	
Caler begir	ndar year (or fiscal year nning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	213,377.	457,259.	402,931.	362,780.	348,300.	1,784,647.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						_ 0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	213,377.	457,259.	402,931.	362,780.	348,300.	1,784,647.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						810,699.
6	Public support. Subtract line 5 from line 4						973,948.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	213,377.	457,259.	402,931.	362,780.	348,300.	1,784,647.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	3,444.	1,203.	- 388.	801.	1,726.	6,786.
9	Net income from unrelated business activities, whether or not the business is regularly carried on					=,	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10		型 对 集 型 ()	1 Mile 3	rulle.		1,791,433.
12	Gross receipts from related active	vities, etc. (see ins	structions)			12	1,805,913.
13	organization, check this box and	stop here		ird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶ []
	tion C. Computation of Pu						
	Public support percentage for 20 Public support percentage from	• •	• • •			14	54.37 %
	· · · · · · · ·					<u> </u>	64.80 %
162	33-1/3% support test—2017. If the and stop here. The organization					ow or more, check	this box ► X
b	33-1/3% support test—2016. If the and stop here. The organization	he organization did n qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a organization .	a, and line 15 is 33	3-1/3% or more, c	-
17a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	re. Explain in Pari	t VI how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this ation qualifies as	box and stop her a publicly support	re. Explain in Par ed organization	t VI how the ►
	Private foundation. If the organ	zation did not che	eck a box on line	13, 16a, 16b, 17a			
RAA					Cal	bodulo A (Earm D	90 or 990-F7) 2017

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support				 		
	ar year (or fiscal year beginning in) >	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(n) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf the value of services or facilities furnished by a governmental unit to the						
	organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)	建筑等 (4)。	郑 藩		人。这为	新	
	tion B. Total Support		, 			· · · · · · · · · · · · · · · · · · ·	
	dar year (or fiscal year beginning in)	(a) 2013 /	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				2		
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Ådd lines 9, 10c, 11, and 12.).						
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, or		a section 501(c))(3) ► □
	tion C. Computation of Pu			10 1		<u> </u>	
15	<i>"</i> ······		- · · ·	ne 13, column (f)).		15	
16	Public support percentage from				•••	16	%
	tion D. Computation of Inv				(0)	т :=	
17	Investment income percentage f			-	mn (t))	17	
18	Investment income percentage f				4 h 15 -	18	
	33-1/3% support tests—2017. If is not more than 33-1/3%, check 23 1/3% support tests—2016. If	k this box and sto j	p here. The orgar	iization qualifies a	is a publicly supp	orted organization	on ►
	33-1/3% support tests—2016. If line 18 is not more than 33-1/3%	check this box a	and stop here. Th	e organization qui	alifies as a public	ly supported org	janization 🕨 📗
	Private foundation. If the organi	zation did not che	ck a box on line	14, 19a, or 19b, cl	neck this box and	see instructions	· • ∐

Part V Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L. (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes, answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
1		
	À.	
3a		
3b		5 5
3c		50
4a	ate.	
4b		
40		3 664
5a		
5b		
50		
7		
1		
9a		
9t		
90		
10a		C. C. M.
10£)	1

Par	Supporting Organizations (continued)	
11	Has the organization accepted a gift or contribution from any of the following persons?	Yes No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the	
	governing body of a supported organization?	11a
ь	A family member of a person described in (a) above?	11b
	A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c
Sec	tion B. Type I Supporting Organizations	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint	Yes No
	or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities if the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2
Sec	tion C. Type II Supporting Organizations	
		Yes No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1
Sec	tion D. All Type III Supporting Organizations	
		Yes No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3
Sec	tion E. Type III Functionally Integrated Supporting Organizations	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).	
í	The organization satisfied the Activities Test. Complete line 2 below	
ı	The organization is the parent of each of its supported organizations. Complete line 3 below	
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instructions)
2	Activities Test. Answer (a) and (b) below.	Vac No
		Yes No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a
i	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b
3	Parent of Supported Organizations. Answer (a) and (b) below.	
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a
ļ	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b
BAA	<u> </u>	

Fa	Type III Non-runctionally integrated 509(a)(3) Supporting Orga	ınıza	uons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on N	ov. 20, 1970 (explain in st complete Sections A	Part VI) See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			S. Wall
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
•	Fair market value of other non-exempt-use assets	1c		
-	Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other factors (explain in detail in Part VI)·	- 10	机砂层机	
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount		75 100 W	Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	。这 有效 是一个	
_2	The state of the s	2	1027 16	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4		4		<u></u>
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	my mm so sufficient to the	
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grate	d Type III supporting org	janization
RA			Schodulo A (E.	orm 990 or 990-E7) 2017

BAA

instructions.

B Breakdown of line 7

a Excess from 2013 ...
b Excess from 2014
c Excess from 2015
d Excess from 2016
e Excess from 2017

from line 1. For result greater than zero, explain in Part VI. See

Excess distributions carryover to 2018. Add lines 3₁ and 4c.

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 Montana Conservation Voters Education 81-0525336 Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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

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

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

• 5	Section 501(c)(4), (5), or (6) o	rganizations Complete Part III.			
Name	of organization Montana	Conservation Voters Educati	ion	Employer identifica	ation number
************	Fund			81-052533	
2000 CV CV CV CV		rganization is exempt under section			zation.
1		organization's direct and indirect political c in of 'political campaign activities')	ampaign activities in	Part IV	
2	Political campaign activity ex	xpenditures (see instructions)		▶\$	
		campaign activities (see instructions) .			
	t I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	> \$	0.
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955	►\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		. Yes No
4:	a Was a correction made?				Yes No
	b If 'Yes,' describe in Part IV.				
Pa		rganization is exempt under section			
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities > \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	iizations for section 52	7 exempt ► \$	l
3	Total exempt function expen line 17b	ditures. Add lines 1 and 2 Enter here and	on Form 1120-POL,	▶ \$	}
4	Did the filing organization file	e Form 1120-POL for this year?			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 deal action committee (PAC). If additional spa	nount paid from the f livered to a separate pr	iling organization's func olitical organization, such	ls. 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)					
(2)					
(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

Schedule C (Form 550 or 550-EZ) 2017				<u>81-0525</u>	
Part II:A Complete if t section 501(I	the organization h)).	is exempt under sec	tion 501(c)(3) and	filed Form 5768 (ele	ection under
A Check ► ☐ if the filing	g organization belong	s to an affiliated group (and	list in Part IV each affilia	ted group member's name	2,
address,	EIN, expenses, and	share of excess lobbying	expenditures).		
B Check ► I If the filin	ig organization chec	ked box A and 'limited cor	itrol' provisions apply.		
(The term	Limits on Lobbyi 'expenditures' mea	ng Expenditures ns amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ires to influence pub	olic opinion (grass roots lot	obying)	525.	
b Total lobbying expenditu	ires to influence a le	gislative body (direct lobby	ying)	3,654.	·····
c Total lobbying expenditu	ires (add lines 1a ar	nd 1b)		4,179.	0.
d Other exempt purpose e	•			469,368.	
e Total exempt purpose ex	xpenditures (add lini	es 1c and 1d)		473,547.	0.
f Lobbying nontaxable am both columns.	nount. Enter the amo	ount from the following tab	le ın	94,709.	
If the amount on line 1e, colu	umn (a) or (b) is.	The lobbying nontaxable	amount is		
Not over \$500,000		20% of the amount on line 1e.		美食	
Over \$500,000 but not over \$1,0	000,000	\$100,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess o	ver \$1,500,000.	1122	
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable a				23,677.	0.
h Subtract line 1g from lin	e la If zero or less	, enter -0-		0.	0.
i Subtract line 1f from line	e 1c. If zero or less,	enter -0-		0.	0.
j If there is an amount othe section 4911 tax for this		line 1h or line 1i, did the org	anızatıon file Form 4720	reporting	Yes No
(Som	e organizations that	4-Year Averaging Period L t made a section 501(h) elo ow. See the separate instr	ection do not have to c		
	Lobby	ying Expenditures During	4-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2 a Lobbying nontaxable amount	80,23	7. 84,770.	79,269.	94,709.	338,985.
b Lobbying ceiling amount (150% of line 2a, column (e))					508,478.
c Total lobbying expenditures	53,38	1. 40,335.	3,780.	4,179.	101,675.
d Grassroots nontaxable amount	20,05	9. 21,193.	19,817.	23,677.	84,746.
e Grassroots ceiling amount (150% of line 2d, column (e))					127,119.
		,			
f Grassroots lobbying expenditures	6,42	7. 2,448.	1,894.	525.	11, 294. n 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 Montana Conservation Voters Education 81-0525336 Part II:B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

The cook Week was as here in the cook in t	(a)	(1	b)
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Am	ount
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:		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
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? .				· · · · · · · · · · · · · · · · · · ·
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1.				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	330000000000000000000000000000000000000	SARTHUU.		7 / / / 5 / <u>3</u> %
b If 'Yes,' enter the amount of any tax incurred under section 4912			Milliothi e e e e e e e e e e e e e e e e e e e	
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III:A: Complete if the organization is exempt under section 501(c)(4), section 501	(a)(E)			
section 501(c)(6).	(C)(S)	or		
				Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior ye	ear?	. 3	
Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5). Part I	, or s II-A, l	ection 50 line 3, is)1(c)
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).				
a Current year .		2 a		
b Carryover from last year .		2b		_
c 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		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
ਇੱਕੋਰੀ∛ 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 groups)	ıp list);	Part I	I-A, lines 1	and

2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

Montana Conservation Voters Education

Employer identification numbe

	Fund	3 Laucación	81-0525336
3754444		or Advised Funds or Other Similar Fur	nds or Accounts
E ST	Complete if the organization ans	wered 'Yes' on Form 990, Part IV, line	6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Borior davised faries	(b) Farias arra outer acceptants
2	Aggregate value of contributions to (during year)		
2	Aggregate value of grants from (during year) .		
3	Aggregate value at end of year		
4	20 0		
5	are the organization's property, subject to the		Yes No
6	for charitable purposes and not for the benefi impermissible private benefit?	ors, and donor advisors in writing that grant funct of the donor or donor advisor, or for any other	ds can be used only purpose conferring Yes No
Par	Conservation Easements. Complete if the organization ans	swered 'Yes' on Form 990, Part IV, line	÷ 7.
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e.g.,	recreation or education) Preservation	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space	<u></u>	
2	Complete lines 2a through 2d if the organization last day of the tax year.	held a qualified conservation contribution in the for	Contract with the Contract of
			Held at the End of the Tax Year
a	Total number of conservation easements	•• • • • • • • • • • • • • • • • • • • •	2 a
	Total acreage restricted by conservation ease		2 b
•	: Number of conservation easements on a cert	ified historic structure included in (a).	2c
•	structure listed in the National Register	in (c) acquired after 7/25/06, and not on a histo	2d
3	Number of conservation easements modified, tratax year ►	ansferred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to cons	servation easement is located >	_
5		egarding the periodic monitoring, inspection, ha	ndling of violations,
	and enforcement of the conservation easeme		Yes No
6	•	, inspecting, handling of violations, and enforcing co	
7	Amount of expenses incurred in monitoring, insp	pecting, handling of violations, and enforcing conse	rvation easements during the year
8	Does each conservation easement reported of and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization repor include, if applicable, the text of the footnote conservation easements.	ts conservation easements in its revenue and expe to the organization's financial statements that of	nse statement, and balance sheet, and describes the organization's accounting for
Pa	Organizations Maintaining Coll Complete if the organization and	ections of Art, Historical Treasures, on swered 'Yes' on Form 990, Part IV, line	r Other Similar Assets. e 8.
1	a If the organization elected, as permitted undo art, historical treasures, or other similar assets I in Part XIII, the text of the footnote to its fina	er SFAS 116 (ASC 958), not to report in its reve neld for public exhibition, education, or research in ancial statements that describes these items.	enue statement and balance sheet works of furtherance of public service, provide,
	b If the organization elected, as permitted undi- historical treasures, or other similar assets held following amounts relating to these items.	er SFAS 116 (ASC 958), to report in its revenue for public exhibition, education, or research in furth	statement and balance sheet works of art, lerance of public service, provide the
	(i) Revenue included on Form 990, Part VIII		> \$
	(ii) Assets included in Form 990, Part X .		► \$
2	If the organization received or held works of art, amounts required to be reported under SFAS	, historical treasures, or other similar assets for fina 5 116 (ASC 958) relating to these items	incial gain, provide the following
	a Revenue included on Form 990, Part VIII, lin	ne 1	> \$
	b Assets included in Form 990, Part X		. ►\$

Schedule D (Form 990) 2017 Montana	Conserv	ation Voters	Education	81-052	
Partilli Organizations Maintaining	Collecti	ons of Art, Histo	rical Treasures, or	Other Similar Ass	ets (continuea)
3 Using the organization's acquisition, acceleratems (check all that apply).	ession, and o	ther records, check a	ny of the following that a	re a significant use of its	collection
a Public exhibition		d Loan	or exchange programs		
b Scholarly research		e 🗌 Other			
c Preservation for future generations	5	_			
4 Provide a description of the organization's Part XIII	s collections	and explain how they	further the organization	s exempt purpose in	
5 During the year, did the organization s to be sold to raise funds rather than to	be maintai	ned as part of the o	rganization's collection)	Yes No
Partive Escrow and Custodial Arr Inne 9, or reported an amo	angemen unt on Fo	i ts. Complete if to orm 990, Part X,	he organization an line 21.	swered 'Yes' on Fo	orm 990, Part IV,
1 a Is the organization an agent, trustee, on Form 990, Part X?	custodian o	r other intermediary	for contributions or other	er assets not included	☐ Yes ☐ No
b If 'Yes,' explain the arrangement in Pa	art XIII and	complete the followi	ng table		
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance	_	· · · · · · · · · · · · · · · · · · ·		. 1f	
2a Did the organization include an amour				-	∐ Yes
b If 'Yes,' explain the arrangement in Pa	art XIII. Che	ck here if the explar	nation has been provide	d on Part XIII	· · · · ·
Part V Endowment Funds. Comp	lete if the	e organization ar	nswered 'Yes' on Fo	orm 990, Part IV, li	ne 10.
	a) Current yea	r (b) Prior yea	r (c) Two years bac	k (d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	•				
2 Provide the estimated percentage of t	he current y	ear end balance (lin	ie 1g, column (a)) held	as	
a Board designated or quasi-endowment	>	%			
b Permanent endowment	%	_			
c Temporarily restricted endowment ▶		8			
The percentages on lines 2a, 2b, and 2c					
3a Are there endowment funds not in the poorganization by:	ssession of	the organization that	are held and administere	d for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations			•		3a(ii)
b If 'Yes' on line 3a(ii), are the related of	organization	s listed as required	on Schedule R?		3b
4 Describe in Part XIII the intended use		anızatıon's endowme	ent funds.		
Complete if the organization		red 'Yes' on For	m 990. Part IV. line	e 11a. See Form 9	90. Part X. line 10.
Description of property		Cost or other basis (investment)	<u> </u>	(c) Accumulated depreciation	(d) Book value
1 a Land		(mixesument)	Dasis (Utilet)	uepreciation	
	·····-			CONTRACTOR OF THE PARTY OF THE	
b Buildings	├ -	 			
C Ecascinola improvementa .			l	I .	I

Description of property	(a) Cost or other basis (b) Cost or other basis (other)		(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				<u> </u>
d Equipment		14,500.	14,500.	0.
e Other		, , , , , , , , , , , , , , , , , , ,		
Total. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X, o	column (B), line 10c)	. •	0.

BAA

Schedule **D** (Form 990) 2017

BAA

Schedule **D** (Form 990) 2017

Part VIII Investments — Other Securities. Complete if the organization answered	'Vos' on Form 990	N/A D Part IV June 11b See Form 9	an Part V line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of	
(1) Financial derivatives		,,	
(2) Closely-held equity interests			· · · · · · · · · · · · · · · · · · ·
(3) Other			
(A)		***	
(B)			
(C)			
(D)			
(E)			
(F)			-
(G)			
(H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)	<u> </u>		(<i>1.19</i> 2/9%) \
Part VIII Investments – Program Related. Complete if the organization answered	L'Voc' on Form 000	N/A N Part IV/ line 11c See Form 9	00 Part V line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-	
	(b) Dook Value	(c) Method of Valdation Cost of Cha-	or-year market value
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	1		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)			有其行為 基準
Part X Other Assets.		0.5.1.1.1.1.050	000 D 1E
Complete if the organization answered	scription	u, Part IV, line 11a. See Form 9	190, Part X, IIne 15. (b) Book value
(1) Endowment	scription		29,892.
(2) Restricted Cash		•	1,802.
(3) Rounding			1.
(4)			
(5)			
(6)			
(7)			
(8)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (c)	(B) line 15)	-	31,695.
	b) line 13.)		31,693.
Other Liabilities. Complete if the organization answered 'Yes' on F	Form 990. Part IV. line 1	1e or 11f. See Form 990. Part X. line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u> (8)			
(9)			
(10)			
(11)			2 (1.74) (1.74) 2 (1.74) (1.74)
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.).	•		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo	ootnote to the organization's f	financial statements that reports the organization's	liability for uncertain
tax positions under FIN 48 (ASC 740). Check here if the text of the footnote			🗆

TEEA3303L 08/10/17

Schedule D (Form 990) 2017 Montana Conservation Voters Education	81-0525336	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, 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		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities . 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	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		
b Other (Describe in Part XIII.).		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expense	es per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		
a Donated services and use of facilities 2a		
b Prior year adjustments 2b		
c Other losses 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
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 .	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; 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.

Part V, Line 4 - Intended Uses Of Endowment Fund

Interest from Endowment Fund will be reinvested.

Schedule **D** (Form 990) 2017

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.

2017

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization Montana Conservation Voters Education Fund

Employer identification number 81-0525336

Form 990, Part III, Line 1 - Organization Mission

Montana Conservation Voters Education Fund's primary exempt purpose is to provide research and public education to the members of conservation and environmental organizations in Montana, and other interested Montanans to protect Montana's clean air and water, wildlife, forests and open space. MCVEF seeks a more informed, educated and empowered conservation and environmental community in Montana, who takes part in this state's democratic process.

Form 990, Part III, Line 4a - Program Service Accomplishments

Conservation Policy Program: At the state level, MCVEF had a robust public policy and public education program related to public education and building support for policies to be pursued by the 2017 Montana State Legislature, including policy accountability and the 2017-2018 Legislative Interim.

Another state priority was to assess the impact of a proposal to transfer federal lands to the state. In addition, we worked with partners to develop a proactive state based public lands agenda. MCVEF provided policy analysis, distributed public information, coordinated media stories, prepared briefing materials and facilitated comments to the legislators and the Administration.

MCVEF provided public policy services, including analysis of state legislative proposals; preparation and distribution of briefing papers; coordination of meetings with allied conservation and environmental groups; and weekly meetings with legislative allies and staff of the Governor's office.

At the federal level, MCVEF coordinated the Climate Action Coalition, working in partnership with the national League of Conservation Voters Education Fund and over a

Employer identification number

81-0525336

Form 990, Part III, Line 4a - Program Service Accomplishments

dozen conservation, public health and fish and wildlife groups. The key focus was to oppose the rollback of EPA's rule to reduce carbon emissions in the United States by 2030. MCVEF worked to educate citizens, local and statewide decision makers on the impacts of climate change and the EPA rule on public health, fish and wildlife and a clean energy future, and to encourage the EPA use its authority to protect public health under the Clean Air Act, including from the negative impact of carbon emissions. MCVEF leaders were part of letters to the editor and guest commentaries.

Total expense: \$178,382

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

Community Organizing, Outreach and List Enhancement: Over the summer of 2017, MCV launched a door to door fundraising canvass. We knocked 16,761 doors, secured 2,594 petition signatures of which 1,738 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.

Toward the end of the year, we launched a Mobilization Center serving as a field operation consisting of three paid canvasser organizers directed to experiment with the efficacy of "deep canvassing" on land development vs land protection and identify opponents to a mine at the Gateway of the Yellowstone National Park.

The launch of the Mobilization Center was the culmination of work building a

Employer identification number

81-0525336

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

coalition combining MCVEF, the Greater Yellowstone Coalition, Montana Wilderness Association, and Montana Wildlife Federation called the Montana Engagement Partnership (MEP). The MEP is a long-term communications and grassroots strategy designed to leverage popular support for shared values (such as public lands, clean water, wildlife, and rural/ag heritage) to create broad change in Montana that will lead to durable conservation and clean energy policies.

MCVEF also maintained strong non-fiduciary responsible chapter boards directing climate, clean energy and public lands work in Flathead County, Missoula County, Gallatin & Park County, and Yellowstone County. Flathead County's chapter focused on launching a municipal climate action plan, showing of a film "To The Ends Of The Earth" and educate the county on a proposed water bottling plant at the north end of Flathead Lake. Missoula County's Chapter also showed the film "To The Ends Of The Earth", organized dozen's of panels, rallies, and speakers on wildfire, climate change, and public lands. Missoula County and Gallatin County were also educating the public on proposed open space bonds that may be on the 2018 ballots. Yellowstone County was also focused on organizing events around our key topics of education, climate change, renewable energy and protecting our public lands.

Total expense: \$106,225

Form 990, Part III, Line 4d - Other Program Services Description

MCVEF Non-partisan Civic Engagement and Ballot Measure: MCVEF coordinated the Voter Rights Coalition, a diverse group of non-partisan organizations, to develop strategy campaigns for various bills during the 2017 legislature affecting voter registration, vote by mail, and polling place access. Groups supporting automatic and online voter registration, worked with county election officials and potential

Name of the organization Montana Conservation Voters Education	Employer identification number
Fund	81-0525336

Form 990, Part III, Line 4d - Other Program Services Description

allies on a key House committee.

Total expense: \$13,832

Form 990, Part VI, Line 11b - Form 990 Review Process

The MCVEF board reviews the Form 990 before it is submitted.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

All MCVEF governing documents are assembled in an organizational manual which is updated annually and reviewed by the Board and staff in an orientation session.

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

board review and approval

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

All MCVEF governing documents are assembled in an organizational manual which is updated annually and reviewed by the Board and staff in an orientation session.

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

		(A)	(B) Program	(C) Management	(D) Fund-
	_	Total	Services	& General	<u>raising</u>
Consultant	Total \$	68,728. 68,728.	67,378. \$ 67,378.	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

Partial Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

Open to Publi Inspections

OMB No 1545 0047

2017

Schedule R (Form 990) 2017

Department of the Treasury Internal Revenue Service

Name of the organization

Montana Conservation Voters Education

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

Employer identification number

81-0525336

(a) Name, address, and EIN (if applicable) of disregarded enti	ty Primary a	ctivity	Legal dom: or foreign	cile (state country)	То	(d) tal income	End-o	(e) f-year assets	Dire	(f) ct contro entity	iling
<u>a)</u>											
(2)					:						
<u>(3)</u>							· · ·				
	anizations. Complete	ıf the ord	anization	answere	d 'Yes	on Form 99	0, Part	IV, line 34,	becau	ıse ıt	
had one or more related tax-exempt organization Name, address, and EIN of related organization	nizations during the ta (b) Primary activity	Legal dom	c) licile (state li country)	(d) Exempt (section	Code	(e) Public charity (if section 501	status	(f) Direct contro entity		Sec 512 controller	(b)(13) d entity ⁷
(1) Montana Conservation Voters Inc PO Box 63 Billings, MT 59103 81-0521030	Education and advocacy on conservation		AT	501 (c)	. (4)	501 (c) (41	N/A		Yes	No X
(2)	Conscivación		41	301(0)	(4)	301(c)	127	N/A			
(3)											
(4)											

TEEA5001L 11/29/17

Schedule R ((Form 990) 2017	Montana	Conservation	Voters	Education

BAA

81-0525336

Schedule R (Form 990) 2017

Page 2

Part III Identification of because it had	of Related Orga one or more re	nizations lated orga	Taxable as inizations f	s a Partnersh ip treated as a pa	p Compl artnershi	lete if the or ip during the	ganızatı tax yea	on answ ar.	ered	'Yes'	on Form 990	, Part	iV, line	e 34,																			
(a) Name, address, and EIN of related organization (b) Primary activity		domicile controlling (state or entity foreign		excluded from under section	unant income d, unrelated, led from tax er sections Share of tot income		Income Share of tot elated, income m tax		of total Share me end-of-				total Share of end-of-year		total Share of end-of-year		Share of end-of-year		f total Share		tionate		Dispropor		Dispropor		of Dispr		(i) Code V-UBI amount in bo 20 of Schedul K-1 (Form	Gene Gene	i) eral or aging ner?	(k Percer owner	ntage
<u></u>		country)		512-514)	<u> </u>				Yes	No	1065)	Yes	No																				
<u>u</u>																																	
]						ļ																										
(2)									-			+																					
												1																					
(3)																																	
]																										
Identification of line 34, because	of Related Orga se it had one or	nizations more rela	Taxable as ated organi	s a Corporation	n or Tru d as a co	ist Complete orporation o	of the o	rganizat uring the	ion ai	nswer /ear.	ed 'Yes' on l	orm 9	90, Pa	irt IV	•																		
Name, address, and EIN	of related organiza	tion Prim	(b) ary activity	(c) Legal domicile (state or foreign	(d) Direction	t Type lling (C.com	(e) of entity o, S corp, trust)	(f) Shar total in	e of		(g) are of end-of- year assets	(h) Percentag ownershi	ge Sec p cont	(i) : 512(b) :rolled e	(13) entity?																		
				country)	entit	Ly Or	irusi)			4			Ye	es	No																		
<u>(1)</u>																																	
		1																															
(2)										+					—																		
		J						l		i			- 1	- 1																			

TEEA5002L 11/29/17

Page 3

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ii.		7. K
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		_
c Gift, grant, or capital contribution from related organization(s)	1c	 ^	X
d Loans or loan guarantees to or for related organization(s)	1d	\vdash	X
e Loans or loan quarantees by related organization(s)	1e	†	l X
	3477		
f Dividends from related organization(s).	1 f		X
g Sale of assets to related organization(s)	1 g	 	T X
h Purchase of assets from related organization(s)	1 h		X
Exchange of assets with related organization(s)	11		X
J Lease of facilities, equipment, or other assets to related organization(s)	1)		X
k Lease of facilities, equipment, or other assets from related organization(s)	1 k		Х
l 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	·I	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1 n	\Box	X
o Sharing of paid employees with related organization(s)	10		X
p Reimbursement paid to related organization(s) for expenses	1 р	X	
q Reimbursement paid by related organization(s) for expenses	1q		Х
r Other transfer of cash or property to related organization(s).	1r		Х
s Other transfer of cash or property from related organization(s)	1s	Ι	X

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Montana Conservation Voters Inc	b	40,000	Cash
(2) Montana Conservation Voters Inc	р	360,870.	Cost Allocatio
(3)			
(4)			
6			
(6)		Sahad	Ha P (Form 990) 2017

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)	(d) Predominant income (related, unre- lated, excluded from tax under sections 512-514)	Are all sec 501(organiz	e) partners tion c)(3) ations?	(f) Share of total income	(g) Share of end-of-year assets	l tion	h) ropor- nate ntions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ner?	(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No	(0 , 000)	Yes	No	†
(1)													
	}]]	
	1												
(2)													
	ļ												l
(3)	1								t				<u>† </u>
						ł							:
	1												
(4)				-					 				
										1			
	}								1	<u> </u>		l	}
(5)				 					 			<u> </u>	
						1							
(6)				1				<u> </u>	 			 	†
	}								1			1	
					İ				1	:			
(7)				 -					 			\vdash	
											1		
	ļ												
(8)	<u> </u>			1				-				+-	
]						ſ					1	
				1]				1		l	
		<u> </u>							<u> </u>				<u> </u>
BAA			TE	EA5004L	08/09/1	7				Schedu	le R (Form 9	90) 2017

BAA

TEEA5004L 08/09/17

Schedule R (Form 990) 2017

Schedule R (Form 990) 2017 Montana Conservation Voters Education 81-05253:

Part VII Supplemental Information.

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