SETTLEMENT AGREEMENT

This settlement agreement is entered into by Jeffrey A. Mangan, in his official capacity as the current Montana Commissioner of Political Practices (hereinafter "the Commissioner") and the following party: The Montana Growth Network (hereinafter "the Respondent").

Montana law authorizes the Commissioner to file an action in district court in order to seek a civil penalty for violation of Montana's campaign finance and practices laws and rules, §§ 13-37-124 and 13-37-128 Mont. Code Ann. In order to avoid a trial of this matter, the Commissioner and the Respondent enter into this agreement to resolve this matter.

- 1. The Commissioner acknowledges that three separate campaign finance and practices complaints were received by the Office of the Commissioner of Political practices in this matter: the first from Mr. Brad Hamlett on January 11, 2013, the second from Mr. Dyrck Van Hyning on January 30, 2013, and the third from Ms. Robyn Driscoll on March 12, 2013 against the Respondent.
- 2. On December 17, 2015, the Commissioner issued a Summary of Facts and Finding of Sufficient Evidence to Show a Violation of Montana's Campaign Practices Act, the Commissioner's cause numbers COPP-2012-CFP-0053, COPP-2013-CFP-005 and COPP-2013-CFP-011 (hereinafter "Decision"). The Decision determined that the Respondent violated certain campaign finance and practices laws and administrative regulations.
- 3. On May 12, 2016, the Commissioner filed an enforcement civil action in the First Judicial District Court for the State of Montana, Lewis and Clark County, Cause No. CDV-2016-395 (hereinafter "Enforcement Action").
- 4. The Respondent acknowledges that it has read and understands the above-noted Decision. The Respondent further acknowledges that it has read and understands the Commissioner's District Court Complaint filed in the above-noted Enforcement Action.
- 5. The Respondent acknowledges that it has read and understands the following findings of fact contained in the Decision and District Court Complaint:
 - a. On May 15, 2012 the Office of the Commissioner of Political Practices (COPP) contacted Jason Priest of Montana Growth Network (MGN)

- informing him of an informal complaint received by the COPP, and that MGN should register as a political committee as soon as possible.
- b. On May 17, 2012, MGN filed a Statement of Organization, establishing an incidental political committee with the Office of the Commissioner of Political Practices.
- c. In the Sufficiency Decision the Commissioner considered the facts of the matter, and found sufficient facts to support adjudication of the separate findings against the Montana Growth Network campaign practice violations by:
 - i. failure to timely register as a political committee, Mont. Code Ann. §§ 13-37-201 and 225, and all associated administrative rules;
 - ii. failure to properly attribute communications, Mont. Code Ann. § 13-35-225;
 - iii. failure to timely and properly file campaign finance reporting and disclosure reports with the COPP, Mont. Code Ann. §§ 13-37-225, 226, 229, 230, and all associated administrative rules;
 - iv. allowing an uncertified individual file campaign finance reports on behalf of the committee, Mont. Code Ann. §§ 13-37-201 and 202, and all associated administrative rules;
 - v. failure to fully report and disclose independent expenditures in the 2012 election cycle, Mont. Code Ann. §§ 13-1-101(7)(a)(iii), 13-37-201, et seq. and all associated administrative rules; and
- d. The Commissioner determines the Respondent should have registered, reported and disclosed their contributors and expenditures as an independent political committee, rather than as an incidental committee in violation of Mont. Code Ann. §§ 13-37-225, 228, 229, 230, 231 and Mont. Admin R. 44.10.327, 329.
- 6. The campaign finance reports filed by the Respondent in 2012 disclosed the following expenditures totaling \$47,102.88:
 - a. \$41,865.28 in the Supreme Court primary.
 - b. \$5,237.60 in support of Jennifer Fielder, Wendy McKamey, Don Richmond, Roger Webb, and Malcom "Mack" Long.

- 7. Following discovery in the enforcement matter, the Commissioner found the Respondent expended at least the additional following unreported and disclosed amounts to influence the 2012 elections, totaling \$144,059.61:
 - a. \$79,200 in the Supreme Court race supporting Laurie McKinnon and opposing Ed Sheehy.
 - b. \$12,116.80 in the Senate District 2 race, supporting Dee Brown and opposing David Fern.
 - c. \$3,494 in the Senate District 6 race, supporting Janua Taylor and opposing Nancy Lindsey.
 - d. \$15,869.80 in the Senate District 7 race, supporting Jennifer Fielder and opposing Mark Sheets and John Marshall.
 - e. \$9,918.15 in the Senate District 10 race, supporting Wendy McKamey and opposing Brad Hamlett.
 - f. \$6,265.80 in the Senate District 17 race, supporting Don Richman and opposing Greg Jergeson.
 - g. \$3,079.50 in the Senate District 18 race, supporting John Brenden and opposing Julie French.
 - h. \$11,517.30 in the Senate District 24 race, supporting Roger Webb and opposing Wanda Grinde.
 - i. \$11,339.56 in the Senate District 26 race, supporting Malcom "Mack" Long and opposing Robyn Driscoll.
 - \$3,375.50 in the Senate District 27 race supporting Elsie Arntzen and opposing Gary Branae.
- 8. Montana Growth Network's 2012, Form 990, Return of Organization Exempt from Income Tax disclosed expenditures of at least \$495,301 in payments to SCRP Media, Persuasion Innovation from Florence, MT, and 47 North Communications of Helena, MT in 2012 for "Media Consulting". (The Form 990 is attached hereto.)
- 9. Respondent admits it violated certain campaign finance and practice laws and associated administrative rules.

- 10. Solely for the purpose of settling this matter and to avoid the expense of litigation, the Respondent agrees not to further contest this matter and pay a civil fine.
- 11. Simultaneously with the return of the executed settlement agreement, the Respondent will remit to the Commissioner \$30,000.00, on a check made out to: "Commissioner of Political Practices" and mailed to the Office of the Commissioner of Political Practices, 1209 8th Avenue, P.O. Box 202401, Helena, Montana, 59620.
- 12. In consideration of payment of the civil fine referenced above, the Commissioner agrees not to pursue any further administrative or court proceedings against the Respondent or other persons that may be named or unnamed in the Decision, based on the matters raised in the Decision and Enforcement Action.
- 13. The Respondent enters into this agreement to avoid further litigation and to fully resolve and settle the Decision and the Enforcement Action with the Commissioner. It is understood and agreed that the payment of the civil fine referenced above, and execution of this settlement agreement by the Respondent is accepted as the sole consideration for full satisfaction and compromise of the Decision and Enforcement Action.
- 14. The Commissioner and the Respondent fully and forever release and discharge each other and their respective officials, officers, members, employees, successors, assigns, agents, ostensible agents, attorneys, and representatives from any and all actions, claims, causes of action, demands, expenses, damages or injuries, whether asserted or unasserted, known or unknown, foreseen or unforeseen, arising out of the matters investigated by the Commissioner and summarized in *COPP v. Montana Growth Network*, First Judicial District Court, Lewis and Clark County, Cause No. CDV-2016-395 enforcement matter.
- 15. The Commissioner and the Respondent agree that the executed Settlement Agreement is a public document and will be made available to members of the public.
- 16. This settlement agreement, consisting of 5 pages, sets forth the entire agreement that has been reached between the Commissioner and the Respondent. No modification or amendment of this agreement will be effective unless both parties complete a subsequent written statement that is signed by both parties.

Settlement Agreement
COPP v. Montana Growth Network
First Judicial District Court, Lewis and Clark County, Cause No. CDV-2016-395
Page 4 of 5

17. The parties agree to file a Stipulation f	or Dismissal with Prejudice requesting the idice, each party to bear its own attorney
fees and costs.	<u> </u>
rees and costs.	
My	4-6-2418
Jeffery A. Mangan	Dated
Commissioner of Political Practices	

Jason Priest for the Montana Growth Network

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

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

A	For the	2012 cale	ndar year, or tax year beginning , 2012, and endi	ng		, 20								
<u>—</u> В			C Name of organization Montana Growth Network		D Employe	r identification nu	ımber							
		111	Doing Business As		ĺ	26-4448503								
님	Address		Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite	E Telephon	e number								
님	Name of		I		406-446-1787									
님	Initial ret		PO BOX 62 City, town or post office, state, and ZIP code											
片	Termina		Red Lodge, MT 59068	G Gross red	ceipts \$	906,723								
닏	Amende	110		or affiliates? Yes										
Ш	Applicat	tion pending	a group return in	cluded? Yes	□No									
			Jason Priest (address same as above)	If "I	lo." attach a	list. (see instructio	ns)							
<u></u>	Tax-exe	mpt status:	☐ 501(c)(3)		p exemption		•							
J	Website		://www.montanagrowthnetwork.org/			of legal domicile:	MT							
_		organization:	✓ Corporation Trust Association Other ► L Year of form	ation: 2009	M State	or regar domicire.	IVII							
P	art I	Summ												
	1	Briefly de	escribe the organization's mission or most significant activities:											
as.		To further	the common good and general welfare of the citizens of Montana by edu	cating the pu	olic about p	oolicy issues,								
Governance	1	to facilita	te community education and public awareness of the impact of government	nt policy, and	to promot	e legal and								
Ë	}	political	peans to encourage citizen participation in good government and free soc	iety.										
Š	2	Check th	is box ▶ ☐ if the organization discontinued its operations or disposed	of more tha	n 25% of i	ts net assets.								
Ğ	3	Number	of voting members of the governing body (Part VI, line 1a)		. 3		4							
య	4	Number	of independent voting members of the governing body (Part VI, line 1b)	4		4							
Activities &	5	Total nur	nber of individuals employed in calendar year 2012 (Part V, line 2a)		5		1							
휹	6	Total nur	nber of volunteers (estimate if necessary)		6		0							
Ā	7a	Total upr	elated business revenue from Part VIII, column (C), line 12		. 7a		0							
	b	Net unre	ated business taxable income from Form 990-T, line 34		7b		0							
_	-	1101 01110		Prior Y	ear	Current Ye	ar							
	8	Contribu	tions and grants (Part VIII, line 1h)		223		906,723							
ğ	9	Drogram	service revenue (Part VIII, line 2g)											
Revenue	10	Invoctme	ent income (Part VIII, column (A), lines 3, 4, and 7d)											
æ	11	Otherre	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)											
	12	Total rov	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		223		906,723							
_	-	Cranto	nd similar amounts paid (Part IX, column (A), lines 1–3)				50,000							
	13	Grants a	paid to or for members (Part IX, column (A), line 4)		=======================================		0							
	14	Benefits	other compensation, employee benefits (Part IX, column (A), lines 5–10)											
es	15	Salaries,	other compensation, employee benefits (Fart IX, Column (A), Ilino 11a)											
Expenses	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)				**							
ď	b	Total fun	draising expenses (Part IX, column (D), line 25)		12.076	SECTION AREA SECTION								
Ш	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		12,976		829,010							
	18	Total exp	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		12,976									
_	19	Revenue	less expenses. Subtract line 18 from line 12	Beginning of C	-12.753	End of Ye	77,713							
5	3			Beginning of C		ZIN OI TO								
Net Assets or	20	Total ass	sets (Part X, line 16)		0		77,713							
A	21		oilities (Part X, line 26)		0		0							
2	22	Net asse	ts or fund balances. Subtract line 21 from line 20	L	0		77,713							
P	art II	Signa	ture Block											
		alties of perio	ry, I declare that I have examined this return, including accompanying schedules and sta	tements, and to	the best of n	ny knowledge and	belief, it is							
tru	ie, correc	ct, and comp	lete. Declaration of preparer (other than officer) is based on all information of which prepared	er has any knov	vieage.									
		TA	,											
Si	gn	Sigr	nature of officer	0	ate									
	ere													
		Typ	e or print name and title											
				Date	Check [√] if PTIN								
	aid	.,			self-emp		34967							
	epare	31 <u> </u>	d Sckolnik I I	Fi	m's EIN ▶									
U	se On	ly Firm's			one no.	602-524-09	174							
7	Al- = 11	Firm's	address ► 11646 N. 129th Way, Scottsdale, AZ 85259 sthis return with the preparer shown above? (see instructions)				s 🗌 No							
M	av tne li	HS DISCUS	is this tetatit with the preparer shown above; (see moradinal)											

Form 99 Part	0 (2012)	Page 2
rait	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	[7]
1	Briefly describe the organization's mission:	. (*
	To further the common good and general welfare of the citizens of Montana by educating the public about policy issues.	
	to facilitate community education and public awareness of the impact of government policy, and to promote legal and	,
	political means to encourage citizen participation in good government and free society.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2	prior Form 990 or 990-EZ?	[] No
	If "Yes," describe these new services on Schedule O.	[⊼] MΩ
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	□No
	If "Yes," describe these changes on Schedule O.	
	Describe the organization's program service accomplishments for each of its three largest program services, as meas expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 687,720 including grants of \$ 50,000) (Revenue \$	1
	The organization used mailings and advertising to educate the public about and advocate for public policy issues relevant to	. /
	Montanans, including judicial fairness, energy and the environment, taxes and the economy, and healthcare.	
41	(O 1) (G) (O 1)	,
4D	(Code:) (Expenses \$ 47,103 including grants of \$) (Revenue \$ Advocate for candidates in local elections that shared the policy goals of the organization.	,)
•		
•		
•		
-		
-		
4c (Code:) (Expenses \$including grants of \$) (Revenue \$)
_		
-		
-		
-		
-		
-		
-		
_		
_		
_		

) (Revenue \$

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$

Part	Checklist of Required Schedules		-	-
	1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		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		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	✓	
Ü	candidates for public office? If "Yes," complete Schedule C, Part I	3	✓	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
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		1
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		√
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		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		✓
	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	11b		✓
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
	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	11d		✓
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		√
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		√
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		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	000	L
		Form	n 990	(2012)

Part	Checklist of Required Schedules (continued)			rugo .
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		√
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√ √
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>·</u> ✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√ √
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u>`</u>
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		✓
33 x	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		√
	the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R. Part V, line 2.	35a	ir e	√
36	and the second s	36		
.7	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,		÷ ,	1 E
38	Part VI	37	✓	<u> </u>

Pari				
-	Check if Schedule O contains a response to any question in this Part V		Yes	. L
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	(335)	100	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	Ā	1	
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			Es.
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1	Tarilly		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			185
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	<u>4a</u>		✓
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	la arc. M		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_	,	
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	✓	
D	qifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).	UD		
· a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			1
	and services provided to the payor?	7a		l v is si
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	13.1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			-11.
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	-(0.50	
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	Ξ'n		
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		VIEW CO.	
11	Section 501(c)(12) organizations. Enter:			11.5
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)		will i	7
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		DSA/16	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	11		Algab
а	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 Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand		LIVED	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		√
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O	See in:	struct	ions.
Sect	on A. Governing Body and Management		Lv	
		il usa	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	un Tirkery Lineary		
	committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		/
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
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's assets? .	5		✓
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		/
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>
44	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	1	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	IIa	٧	
b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	es. 30
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	▼	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	✓	
13	Did the organization have a written whistleblower policy?	13		✓
14 15	Did the organization have a written document retention and destruction policy?	14	<u> </u>	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			4.E7
а	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	
b	Other officers or key employees of the organization	15b	✓_	71 383
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		√
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	161		
Cest		16b	_	
	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► None	_		
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: > IASON S PRIEST PO BOX 62 RED LODGE MT 59068 406-446-1787	of the	:	

Form	രാവ	(2012)
	330	120121

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees	, and
	Independent Contractors	•

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

1a 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.

Check this box if neither the organization no	r any relate	d org	aniz	atio	on c	ompe	ensa	ated any currer	nt officer, directo	r, or trustee.
(A) Name and Title	(B) Average	box,	unles	Pos neck	erson	e than is bot	h an	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below dotted line)	Individua or direct		,	-	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
(1) JASON S. PRIEST	5	,		,						
EXECUTIVE DIRECTOR- PRESIDENT/TREASURER		✓		\checkmark	_			0	0	0
(2) JESS PETERSON	0.5	,								
DIRECTOR		✓		_				0	0	0
(3) JIM MCCRAY	0.5	,								
DIRECTOR		✓						0	0	0
(4) ED WALKER,	5								1	
DIRECTOR		✓	Ш					0	0	0
(5)										
(6)										
(7)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
(8)										
(9)										
(10)										
(11)										
(12)										
(13)							-	-		
(14)			-							

Pari	VIII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees		nd F C)	lighe	st C	compensated E	mployees (contii	nued)	
(A) Name and title		(B) Average hours per week (list any	box, u	inles r and	eck s pe d a d	rson irect	than o	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(15)												
(16)												
(17)												
(18)												
(19)												
(02)												
(24)												_
(25)												
1b c d	Sub-total	VII, Sectio	n A 					A A A	0		20 of	
2	Total number of individuals (including but reportable compensation from the organi	t not limited zation ► N	i to th	ose	list	ed	above	e) W	no received m	ore than \$100,00	Yes	Nio
3	Did the organization list any former of employee on line 1a? If "Yes," complete	Schedule J	for su	ıch	indi	ivid	ıal				ed 3	√
4	For any individual listed on line 1a, is the organization and related organizations individual	greater that	an \$1 	50,	000)? I: 	f "Ye	s," •	complete Sch	edule J for suc	on 4	√
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co ? If "Yes," c	ompei compl	nsat ete	tion <i>Sch</i>	froi nedu	n any ule Jii	un of or	related organiz such person	ation or individu	ıal 5	✓
Section 1	on B. Independent Contractors Complete this table for your five highest compensation from the organization. Repyear.	compensat oort compe	ed ind	depe	end or th	ent ne c	contr	acto lar y	ors that receive year ending wit	ed more than \$1 h or within the o	00,000 of rganization's tax	<
	(A) Name and business add	Iress							(B) Description of s	ervices	(C) Compensation	
SRCP	Media 201 North Union Street, Suite 200 Alexasion Innovation 5472 Klements Ln Florence	kandria, VA	22314 6608					_	edia consulting			5,758),77
	ommunications 1820 N. Last Chance Gulch							-	edia consulting			,760
2	Total number of independent contractor	ors (includi	ng bu	ıt n	ot	limi	ted to	o th	nose listed ab	ove) who		
	received more than \$100,000 of compen	sation from	the o	ryal	IIIZ8	uOf		-	3		Form 990 (2012

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
at st	1a	Federated campaigns	1a					
ara our	b	Membership dues	1b					
s, G Am	c	Fundraising events	10					
Gift	d	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contributions)	1e					
ntio er S	f	All other contributions, gifts, grants,						
혈		and similar amounts not included above		906,723				
Conti and (g	Noncash contributions included in lines 1a						
	h	Total. Add lines 1a-1f		Business Code	906,723			
Program Service Revenue	١.			Business Code		Harrie Jan Paris		
eVe	2a							
ė, H	b	***************************************						
Ž	C	4						
Se	d							
ıraπ	e 4	All other program service revenue						
rog	f g	Total. Add lines 2a–2f						
	3	Investment income (including				Country of the St. of	Miller C	
		and other similar amounts) .						1
	4	Income from investment of tax-exe		- 1				
	5			. 1				
		(i) Real		(ii) Personal				
	6a	Gross rents					1.21	
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		▶				
	7a	Gross amount from sales of (i) Securit	ties	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses .						
	С	Gain or (loss)	ļ			Transfer of		
	d	Net gain or (loss)		▶				- President and the
ne			:					
-	8a	Gross income from fundraising		1				
Other Rever		events (not including \$		Į.	4197			
ŭ		of contributions reported on line 1 See Part IV, line 18		1				
he		·	· a					
₽	b	Less: direct expenses Net income or (loss) from fundra	b. bl	events . ►				F-9211_72=-0.02-12.
		Gross income from gaming activi		events .		16 5 4 2 7 1		
	Ja	See Part IV, line 19						
	b	Less: direct expenses	. b					
	C	Net income or (loss) from gamin	L.	rities ▶	a . Person charter to the come is in		and the second of the second	Manager Value
	10a	Gross sales of inventory,			TARGET ASI			rgina estada estada
		returns and allowances	. a					
	b	Less: cost of goods sold	. b					
	C	Net income or (loss) from sales	of inve	ntory 🕨				- 11
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	С	***************************************						
	d	All other revenue	. [
	е	Total. Add lines 11a-11d		▶				
		Total revenue See instructions		. [

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 following SOP 98-2 (ASC 958-720)

	t IX Statement of Functional Expenses				
Secti	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	II other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon	se to any question	in this Part IX		
Do n 8b, 9	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	50,000	50,000		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 8	Other salaries and wages	32,750	16,375	16,375	
9	Other employee benefits	2.249	1,125	1,124	
10	Payroll taxes	3,191	1,595	1,596	
11	Fees for services (non-employees):				
а	Management				
b	Legal	71,112		71,112	
C	Accounting	368		368	
ď	Lobbying				
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	AMERICA A LEGISLA CONTRACTOR	Alexander State	
	Other. (If line 11g amount exceeds 10% of line 25, column				
g	(A) amount, list line 11g expenses on Schedule O.)	262,101	262,101		
12	Advertising and promotion	206,757	206,757		
13	Office expenses	1,408	200,707	1,408	· · · · · · · · · · · · · · · · · · ·
14	Information technology	2,991	2,991	1,100	
15	Royalties	0			
16	Occupancy	994		994	
17	Travel	16,746	16,746		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings .				
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization .	0			
23	Insurance	1,211		1,211	
24	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.)				
-	Issue education mailing	177.131	177,131	A SECTION OF SECTION	
a b	13340 education manning	177,131	1//,131		
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	829,010	734,823	94,187	

	art X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part	X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	0	1	77,713
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section	ner Sooth Telephone		
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ş		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
ĕ	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	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	
- 111	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	0		77,713
	17	Accounts payable and accrued expenses	0	-	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		21	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	ENVIRONMENT OF THE PARTY OF THE
ies	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
Ę		disqualified persons. Complete Part II of Schedule L		22	SUSTRIENTS HIGHER SOLIN
Liabilities	00	Secured mortgages and notes payable to unrelated third parties		23	
	23 24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and		III. 3	
es		complete lines 27 through 29, and lines 33 and 34.			
2	27	Unrestricted net assets		27	
12	28	Temporarily restricted net assets		28	
핑	29	Permanently restricted net assets		29	
들		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and		127	
٦		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
Sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
۲	32	Retained earnings, endowment, accumulated income, or other funds .		32	77,713
Š	33	Total net assets or fund balances	0		77,713
	34	Total liabilities and net assets/fund balances	0	34	77.713
					Form 990 (2012)

_	4	-
Page	-1	4

Form 9	90 (2012)			Pa	age 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			06.723
2	Total expenses (must equal Part IX, column (A), line 25)	2		8	29.010
3	Revenue less expenses. Subtract line 2 from line 1	3			77,713
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10			77,713
Pari	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
-			1	Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O.		32-		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or			
	reviewed on a separate basis, consolidated basis, or both:			N =	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		ja - T	W. 17	
b	Were the organization's financial statements audited by an independent accountant?		2b		1
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a		1	
	separate basis, consolidated basis, or both:				TIA SE
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			1857	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versight			
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in			
	Schedule O.			3.1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	rgo the	1		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b		
			For	m 990	(2012)

Schedule B

(Form 990, 990-EZ, Department of the Treasury Internal Revenue Service

or 990-PF)

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2012

Name o	f the organization		Employer identification number
Montan	a Growth Network		26-4448503
	zation type (check o	ne):	
Filers o	of:	Section:	
Form 9	90 or 990-EZ	✓ 501(c)(4) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private for	undation
		527 political organization	
Form 9	90-PF	501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundate	ation
		501(c)(3) taxable private foundation	
	Only a section 501(c)(covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule. See
Genera	il Rule		
Ø		filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,0 one contributor. Complete Parts I and II.	000 or more (in money or
Special	Rules		
	under sections 509	(3) organization filing Form 990 or 990-EZ that met the 331/3 % suppor (a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during 5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Ford II.	the year, a contribution of
	during the year, tota	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from all contributions of more than \$1,000 for use exclusively for religious, chapses, or the prevention of cruelty to children or animals. Complete Parts	aritable, scientific, literary,
	during the year, cor not total to more the year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from tributions for use exclusively for religious, charitable, etc., purposes, bean \$1,000. If this box is checked, enter here the total contributions that ely religious, charitable, etc., purpose. Do not complete any of the participation because it received nonexclusively religious, charitable, etc., car	ut these contributions did twere received during the s unless the General Rule ontributions of \$5,000 or
Cautior	n. An organization the	at is not covered by the General Rule and/or the Special Rules does no	t file Schedule B (Form 990,

Name of organization

Montana Growth Network

Employer identification number

26-4448503

Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PUBLIC	\$ 150,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.		(c) Total contributions	(d) Type of contribution
2	INSPECTION	\$ 50,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.		(c) Total contributions	(d) Type of contribution
3		\$10,000	Person
(a) No.		(c) Total contributions	(d) Type of contribution
4		\$ 25,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.		(c) Total contributions	(d) Type of contribution
5		\$25,000	Person
(a) No.		(c) Total contributions	(d) Type of contribution
6		\$	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Employer identification number Name of organization 26-4448503 Montana Growth Network Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part 1 (a) (c) (d) **Total contributions** Type of contribution No. \checkmark Person Payroll Noncash 8,000 **PUBLIC** (Complete Part II if there is a noncash contribution.) (a) (d) (c) Type of contribution No. **Total contributions** INSPECTION 8 Person \square Payroll 100,000 Noncash (Complete Part II if there is a noncash contribution.) (a) (c) (d) No. **Total contributions** Type of contribution \mathbf{A} 9 Person Payroll 100,000 Noncash (Complete Part II if there is a noncash contribution.) (c) (a) (d) No. **Total contributions** Type of contribution 10 Person \checkmark Pavroll 90,000 Noncash П (Complete Part II if there is a noncash contribution.) (c) (d) (a) No. **Total contributions** Type of contribution Person \checkmark 11 Payroll 25,000 Noncash (Complete Part II if there is a noncash contribution.) (a) (c) (d) No. Total contributions Type of contribution Person \square 12 Payroll 200,000 Noncash (Complete Part II if there is a noncash contribution.)

Name of organization Employer identification number
Montana Growth Network 26-4448503

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	PUBLIC	\$25,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	INSPECTION	(c) Total contributions	(d) Type of contribution
	COPY	\$	Person
(a) No.		(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.		(c) . Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

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

| 2012

Complete if the organization is described below.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

(3)

(4)

(5)

(6)

If the organization answered "Yes," to 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," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Employer identification number Name of organization 26-4448503 Montana Growth Network Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 3 Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 . . . Enter the amount of any excise tax incurred by organization managers under section 4955 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 3 Yes No b If "Yes." describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filling organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (c) EIN (d) Amount paid from (e) Amount of political (a) Name (b) Address filing organization's contributions received and promptly and directly funds. If none, enter -0-. delivered to a separate political organization, If none, enter -0-. (1)(2)

P	20	10	2

Par	t II-A Complete if the organizatio section 501(h)).	n is exempt	under section (501(c)(3) and file	d Form 5768 (ele	ction under
A	Check ► ☐ if the filing organization be name, address, EIN, expe					up member's
B	Check 🕨 🗌 if the filing organization ch			ntrol" provisions	apply.	
	Limits on Lobb				(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amount	s paid or incurred	l.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinior	n (grass roots lobb	ying)		
b	Total lobbying expenditures to influence	a legislative b	ody (direct lobbyir	ng)		
¢	Total lobbying expenditures (add lines 1	a and 1b) .				
d	Other exempt purpose expenditures .					
е						
f	Lobbying nontaxable amount. Enter columns.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amou	nt is:		
	Not over \$500,000		mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000		s 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess of			
	Over \$17,000,000	\$1,000,000.	5 6 7 5 61 415 6X0000 1	για: ψ1,000,000.		
g	Grassroots nontaxable amount (enter 25				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
h	Subtract line 1g from line 1a. If zero or le	•				
i	Subtract line 1f from line 1c. If zero or les	•				
i	If there is an amount other than zero	,	1h or line 1i, die	d the organization	file Form 4720	
•	reporting section 4911 tax for this year?					Yes No
	(Some organizations that ma columns below. S	de a section to See the instru	ctions for lines 2	not have to com a through 2f on pa		
	Lobbying	Expenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2012

	(election under section 501(h)).	[(a	3)		(b)	
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No	А	moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u></u>		1.0.0	1 -2 7 3
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? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-	-			
h i	Other activities?	-				-
i	Total. Add lines 1c through 1i	5.vt	·	-		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	St. I Day	57241.7			
b	If "Yes," enter the amount of any tax incurred under section 4912				man dat to the	
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	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).)(5), c	r se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		1
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		1
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."		Part		line	3, is
1	Dues, assessments and similar amounts from members	· of	1			
2	political expenses for which the section 527(f) tax was paid).	, 0,				
а	Current year		2a			
b	Carryover from last year		2b		-	
c	Total	- F	2c			
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					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ying				
	and political expenditure next year?	. [4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Part	Supplemental Information	D - 4 II	A /-F	C:11:		
Comp ist); P	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; art II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	Part II	-А (ап	illated	group)
Advoc	ate for candidates in local elections that shared the policy goals of the organization.					

*******				*********		

Schedule C (Forr	m 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information (continued)	

	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
		· · · · · · · · · · · · · · · · · · ·
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	***************************************	
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	***************************************	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Open to Public Inspection OMB No. 1545-0047 **%**

Employer identification number 26-4448503 Montana Growth Network

Part General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance,

the selection criteria used to award the grants or assistance?	ard the grants o	or assistance?	· · ·				· · · · · · · · · · · · · · · · · · ·
2	ion s procedure	es for monitoring t	the use of grant fur	nds in the United	States.		
Part IV, line 21, for any recipient that received	stance to Go ecipient that r	vernments and eceived more th	Organizations in lan \$5,000. Part I	n the United St Il can be duplica	ates. Complete	its and Organizations in the United States. Complete if the organization answ more than \$5,000. Part II can be duplicated if additional space is needed.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) American Tradition Partnership 3 Bethesda Metro Center Ste 700 3	26-2289809	501C-4	50,000	0	. 0	C	Ganaral cumort grant
(2) Bethesda, MD 20814							מפופומו מתאחחור הומנור
	Į.						
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1(c)(3) and gov	ernment organiza	tions listed in the li	ne 1 table			0
Enter total number of other organ	nizations listed	in the line 1 table					
For Paperwork Reduction Act Notice, see the Instructions for Form	the Instructions	s for Form 990.		C	Cat. No. 50055P		Schedule I (Form 990) (2012)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2012)
Part III Grants ar

		-	J			
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
64		5	1			
ო						
4						
ល						
9						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	e this part to pro	vide the informatio	n required in Part I,	line 2, Part III, column (b)	, and any other additional
Montana Gr	Montana Growth Network maintains records in its corporate and accounting records regarding the amounts of grants made to organizations, the status of those organizations.	ate and accounting	records regarding the	amounts of grants ma	de to organizations, the status	s of those organizations.
and the app	and the approval of grants by the board of directors. Montana Growth Network receives year-end report on use of funds.	itana Growth Netwo	rk receives year-end r	eport on use of funds.		
		1		0 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
6 7 7 7 8 8 8 8 8 8 8						
			11 11 11 11 11 11 11 11 11 11 11 11 11			

Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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.

Inspection

Employer identification number

Montana Growth Network	26-4448503
Part VI #11 - Electronic copies of this tax return have been circulated to members of its governing boar	
Part VI #19 - Upon written request the Organization's governing documents, conflict of interest policy a	and financial statements will
be made available.	
Part III . The organization changed its filing status from a Fox (-)/2) to Fox(-) (1)	

1		
2		ANGIE SPARKS Glerk of District Count
3		ANGIE SPARKA PISTIG ONEY Deputy
4		
5	MONTANA EIDET III	DICIAL DICTIPACE CONTE
6	LEWIS ANI	DICIAL DISTRICT COURT, CLARK COUNTY
7 8	The COMMISSIONER OF POLITICAL PRACTICES OF THE STATE OF	AL) Cause No. CDV 2016-395
9	MONTANA, by and through JEFF MANGAN, in his official capacity as the Commissioner of Political Practices	Judge Kathy Seeley s,)
10	Plaintiff,	
11	vs.	ORDER OF DISMISSAL WITH PREJUDICE
12 13	MONTANA GROWTH NETWORK, INC.,)))
14	Defendant.)
15	* * * * * *	* * * * * * * * * *
16	Based upon Stipulation and good o	cause appearing,
17	IT IS HEREBY ORDERED that	the above-captioned cause is DISMISSED, and
18	the same is hereby DISMISSED WITH	PREJUDICE, as having been fully settled on
19	the merits, each party to pay their own at	torney's fees and costs.
20	DATED this $\frac{13}{2}$ day of April, 2018.	
21		·
22		VATLIV CETT
23	์ ว	Che Honorable Kathy Seeley
24	Ï	District Court Judge
25	cc: Bishop and Heenan Jaime MacNaughton	
26	Parker, Heitz & Cosgrove, PLLC	

1	Mark D. Parker PARKER, HEITZ & COSGROVE, PLLC	
2	401 N. 31st Street, Suite 805	ETLED
3		FILED
4		APR 1 3 2018
5		ANGIF SPARKS Glerk by District Court By Deputy Clerk
6	Attorneys for Defendant	Deputy Clerk
7		
8	MONTANA FIDET HIDIOL	I Dicenion column
9	MONTANA FIRST JUDICIA LEWIS AND CLA	RK COUNTY
	The COMMISSIONER OF POLITICAL) Cause No. CDV 2016-395
10	PRACTICES OF THE STATE OF MONTANA, by and through JEFF)
11	MANGAN, in his official capacity as the Commissioner of Political Practices,) Judge Kathy Seeley)
12)
13	Plaintiff,) STIPULATION FOR DISMISSAL
14	VS.) WITH PREJUDICE
15	MONTANA GROWTH NETWORK, INC.,))
16	Defendant.))
17	*****	* * * * *
18	COME NOW, the Plaintiff, the Commission	oner of Political Practices for the State of
19	Montana, and Defendant, Montana Growth Net	
20		
21	record, pursuant to Rule 41(a)(1), M.R.Civ.P., an	
22	above-referenced cause with prejudice as having	been fully settled upon the merits. each
1	party to pay their own attorney's fees and costs.	
23	///	
24	///	ŭ.
25	///	
26	Stipulation for Dismissal with Prejudice	Page 1 of 2

	DATED this day of April, 2018.
	PARKER, HEITZ & COSGROVE, PLLC 401 N. 31st Street, Suite 805
3	P.O. Box 7212 Billings, Montana 59103-7212
4	1
5	
6	Mark D. Parker
7	Attorneys for Defendant
8	DATED this day of April, 2018.
9	
10	1031 Zimmerman (r.
11	Billings, MT 59102
12	Co. Rh. 1 To Mad
13	Gene R. Jarussi
14	Attorney for Plaintiff (
15	
16	
17	
18	
19	
20	
21	a a
22	K
23	
24	
25	
- 11	

Page 2 of 2

Stipulation for Dismissal with Prejudice