

# Ravalli County Sheriff's Office-Wellness Program

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*2025 Montana Opioid Abatement Trust  
Grants-second half of 2025*

## ***Ravalli County Sheriff's Office***

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Steve Holton  
205 Bedford St Suite G  
Hamilton, MT 59840

jbiesiot@rc.mt.gov  
O: 406-375-6677

## ***Jaime Biesiot***

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# Application Form

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## *Region Selection*

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To collaborate with someone else on this request, click the blue "Collaborate" button in the top-right corner.

### **Project Name\***

Ravalli County Sheriff's Office-Wellness Program

**You may only select one Abatement Region, if you are applying for funding from more than one region you will need to fill out and submit a separate application for each region.**

### **Select Multi County Abatement Region OR Metro Region\***

Select the Multi-County Abatement Region **OR** the Metro Region you are requesting grant funds from. Click [HERE](#) for a detailed map of Multi-County Regions and Metro Regions.

Ravalli County Metro Region

### **Regional Funding Request\***

If you are applying to multiple regions, please select all the regions to which you are submitting applications.

Ravalli Metro Region

## *Application Overview*

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### **About the Organization/Program\***

Give a brief description of the Organization/Program/Project. Include the mission statement and the services provided.

The Ravalli County Sheriff's Office has established the Ravalli County Behavioral Health Coalition that represents interagency collaboration towards an appropriate system of response to individuals experiencing behavioral health crises. This coalition is also working to promote a strong workforce by providing educational support to those agencies represented. Within this coalition are 5 subcommittees: Crisis Intervention Team Training (CIT), Officer Wellness/Peer Support, 911/988, CIT Referrals, and Ravalli County Threat Assessment Team. Our officer wellness is a new program within the last year that we are hoping to continue to fund.

### What category does the program fit into\*

Check the category/categories the program fits into. You may select more than one option.

Click [HERE](#) for a list of approved opioid remediation uses

- Prevention
- Treatment
- Recovery

### Exhibit E List of Opioid Remediation Uses

*Schedule A - select all that apply*

G. PREVENTION PROGRAMS

### Exhibit E List of Opioid Remediation Uses

*Schedule B - select all that apply*

I. FIRST RESPONDERS

### How does the program meet the Opioid Remediation Guidelines\*

Provide a detailed explanation of how the program fits into the approved Opioid Remediation Guidelines selected in the above question.

*Please be specific*

The Ravalli County Officer Wellness/Peer Support Program meets the approved Opioid Remediation Guidelines in Part Three, 1:2. Provision of wellness and support services for first responders and others who experience secondary trauma associated with opioid-related emergency events. the Lexipol program is accredited and will support effective coping and healing due to the chronic exposure of critical events that involve substance abuse. This is approximately 60-70% of the calls for service in our county.

### New Program or Existing\*

Is the funding intended for a new program or to expand an existing program?

A proposed supplement or expansion to a program.

## *Fiscal Information*

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### **Requested Amount\***

\$11,198.10

### **Program Budget\***

How will the funds be allocated? Attach a detailed line item budget breakdown for the program. If the funds are intended for a multi-year program please specify the amount budgeted for each year.

Ravalli CSO Wellness Renewal 2026.pdf

### **Source of Funding\***

Does the program currently receive funding from another source? If yes, please explain in detail. (i.e. amount, funding source, etc.)

Grant funding is intended for the creation or expansion of opioid prevention, treatment, and recovery projects. The money is **NOT** meant to replace or supplant existing funding.

We began this program last year with the financial support of the MOAT grant. Securing this grant again will allow us to purchase the APP for a second year to continue with our Wellness Program.

### **Do you have a Fiscal Agent\***

Yes

## *Fiscal Agent Contact Info*

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### **Fiscal Agent Name\***

Ravalli County

### **Fiscal Agent Email Address\***

jexner@rc.mt.gov

## *Program Abstract*

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### **Program Description\***

Describe the objectives of this project. Provide a detailed overview of the program, including its purpose, priorities & objectives, and intended results.

The objectives of utilizing Lexipol the Ravalli County Sheriff's Office are to provide our deputies, chaplains and individuals within the Ravalli County Sheriff's Office who interact with community members daily, the resources needed for wellness while managing the ongoing stress and exposure to critical events. The purpose of utilizing the Cordico Law Enforcement Wellness Solution is to allow our personnel instant, confidential access to these services at their convenience due to the unpredictable hours they work each week and weekend.

### Specific Goals\*

Describe the primary goals your program seeks to achieve. For each goal, explain how the program intends to accomplish it.

The goal of this program is to improve the mental health and well-being of our agency employees. By utilizing the Cordico App, we hope to continue building on our initial goals of:

1. Strengthen the overall culture by providing stigma-free access to culturally competent therapists and counseling resources
2. Empowering individuals on our peer support team
3. Helping officers cope with the effects of chronic exposure to critical events and improve officer decision making, empathy, and resilience, which in turn enhances deputy/community relations.

### Evaluation Method\*

Please explain in detail how you will gauge the effectiveness and overall impact of the program. What specific evaluation methods, tools, or metrics will you use to measure success.

We will also continue to utilize the printable report form within the APP to track trends in usage.

### Data Source\*

What data or evidence will you collect to show you are meeting your program goals? What specific information, metrics and documentation will you provide to demonstrate the program objectives have been achieved.

If funded again, the Ravalli County Sheriff's Office will continue to utilize the anonymous Microsoft form that will be distributed to our agency quarterly to collect data regarding the effectiveness of this program. This form will include the following topics and questions:

1. Average weekly use of the APP
2. Top 5 most used Wellness Guides (There are over 60 to choose from and they include: Substance Abuse, Posttraumatic Stress, Burnout, Healthy Habits, Grief and Loss etc)
3. Use of Self-Assessment
4. Number of users connected to in-person therapists
5. What resources are you still in need of?

### Awareness\*

How do you plan to create awareness of this program? Briefly describe what action the program plans to take to create awareness in the community.

Our program awareness will be within the Ravalli County Sheriff's Office and will be supported by our Sheriff, Undersheriff and all administrative staff. Jaime Biesiot, Behavioral Health Manager and Detective Dan Mendonca, Wellness Coordinator for the Ravalli County Sheriff's Office will provide a presentation of the

Cordico App to all staff for a demonstration of how it can be utilized. Zoe Parks, our Lexipol representative will also provide technical assistance to the RCSO as needed throughout the 12 months of this contract.

## *Additional Documents*

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### **Tax Exempt Organization\***

By clicking this box you are confirming the applying organization is a tax exempt organization.

Yes

### **Tax Exempt Determination Letter\***

Please upload a copy of the Organization 501(C)(3) Tax Exempt Determination Letter.

Tax-exempt status letter.pdf

**Use this section to upload or explain any additional information regarding the program/organization. ie. a detailed budget projection, program/organization history, etc.**

**Upload #1**

**Upload #2**

**Upload #3**

### **Additional Information**

Thank you for your consideration of this application.

## File Attachment Summary

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### *Applicant File Uploads*

- Ravalli CSO Wellness Renewal 2026.pdf
- Tax-exempt status letter.pdf



MASTER SERVICE AGREEMENT

Initial Term Start Date: 02/01/2026

Initial Term End Date: 01/31/2027

Account Executive Information

Zoe Parks
Customer Success Manager
zshops@lexipol.com

Lexipol LLC
2611 Internet Blvd., Ste. 120
Frisco, Texas 75034

Agency Information

Ravalli County Sheriff's Office
205 Bedford St Ste G
Hamilton, Montana 59840

This Master Service Agreement (the "Agreement") is entered into by and between Lexipol, LLC, a Delaware limited liability company ("Lexipol"), and the department, entity, or organization referenced above ("Agency").

This Agreement consists of:

- (a) this Cover Sheet
(b) Exhibit A - Selected Services and Associated Fees
(c) Exhibit B - Description of Services
(d) Exhibit C - Terms and Conditions of Service

Each individual signing below represents and warrants that they have full and complete authority to bind the party on whose behalf they are signing to all terms and conditions contained in this Agreement.

Ravalli County Sheriff's Office

Lexipol, LLC

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Date Signed: \_\_\_\_\_

**Exhibit A**

**SELECTED SERVICES AND ASSOCIATED FEES**

Agency is purchasing the following:

**Order Summary**

001 Cordico App Annual Subscription							
Qty	Description	Unit Price	Disc (%)	Disc Amount	Tax Amount	Extended	
62	Cordico Wellness App	\$11,999.00	10%	\$1,199.90	\$0.00	\$10,799.10	
1	Cordico Peer Support Training and Certification Annual Subscription	\$399.00	0%	\$0.00	\$0.00	\$399.00	
1	Securus - Peer Support Training and Certification Annual Subscription	\$0.00	0%	\$0.00	\$0.00	\$0.00	
				Discount:	\$1,199.90	Subtotal:	\$11,198.10

Discount:	\$1,199.90
Subtotal:	\$11,198.10
Tax:	
Total Due:	\$11,198.10

**Discount Notes**

Policy Customer; 14 months for the price of 12 months if signed prior to 12/31/24

## **Exhibit B**

### **Description of Services**

#### **Cordico Peer Support Training and Certification**

Cordico's Training and Certification Peer Support membership provides industry-leading best practices and adheres to national guidelines to ensure your peer teams are comprehensively equipped to offer proactive, reactive and post-incident support. With a strong foundation in ethical and legal standards, our membership is tailored to empower both new and established programs with excellence in service and support. Annual memberships include:

- 100% online and asynchronous training
- 25 hours of core curriculum for peer support member certification
- Certificate of completion along with Peer Support Certified Badge
- Numerous CEU hours of advanced training
- Live and interactive webinars with peer support subject matter experts
- Peer support toolkit with downloadable resources to enhance your peer support team

#### **Cordico Wellness Solution**

Public safety personnel frequently face high-stress situations, traumatic events and unique workplace challenges that can significantly impact their mental health and overall wellbeing. In addition to these stressors, they face the stigma around asking for help and the fear of being seen as weak or unfit for duty. Lexipol's Cordico wellness solution provides a completely anonymous platform for personnel to proactively seek help. The app includes a complete range of self-assessments, one-touch access to crisis support lines, and a directory with your agency's peer support team, chaplains, and therapists. Also included are wellness toolkits with over 60 behavioral health guides on topics like family and relationships, physical fitness and nutrition, and more.

- Maintain anonymity with a single agency login.
- Provide your personnel with 24/7 access to confidential assessments and counseling resources.
- Help personnel cope with the effects of critical events and chronic exposure to trauma.
- Empower your peer support team by placing their contact information at the fingertips of your personnel.
- Improve personnel decision-making, empathy and resilience, enhancing the service your organization provides.
- Personalize your app with your agency's badge and a welcome video from your leadership.
- Support agency retirees and family members (included with agency subscription).

#### **Cordico Peer Support Training and Certification Annual Subscription**

Cordico's Training and Certification Peer Support membership provides industry-leading best practices and adheres to national guidelines to ensure your peer teams are comprehensively equipped to offer proactive, reactive and post-incident support. With a strong foundation in ethical and legal standards, our membership is tailored to empower both new and established programs with excellence in service and support. Annual memberships include:

- 100% online and asynchronous training
- 25 hours of core curriculum for peer support member certification
- Certificate of completion along with Peer Support Certified Badge
- Numerous CEU hours of advanced training
- Live and interactive webinars with peer support subject matter experts
- Peer support toolkit with downloadable resources to enhance your peer support team

## Exhibit C Terms and Conditions of Service

These Terms and Conditions of Service (the “Terms”) govern the rights and obligations of Lexipol, LLC (“Lexipol”) and Agency under this Agreement. Lexipol and Agency may each be referred to herein as a “Party” and collectively as the “Parties.”

1. **Definitions.** Each of the following capitalized terms will have the meaning included in this Section. Other capitalized terms are defined within their respective sections, below.

1.1 **“Agency”** means the department, agency, office, organization, company, or other entity purchasing and/or subscribing to Lexipol Services, as may be further denoted on the cover sheet to which these Terms are attached.

1.2 **“Agency Data”** means all data, information, and content owned by Agency for purposes of identifying authorized users, confirming departmental information, or which are ancillary to receipt of Lexipol Services.

1.3 **“Agreement”** means the combination of the cover sheet; Exhibit A (“Selected Services and Associated Fees”); Exhibit B (Description of Services); this Exhibit C (“Terms and Conditions of Service”); and any other documents attached hereto and expressly incorporated herein by reference.

1.4 **“Custom Agreement Terms”** refers to an optional section within Exhibit A which allows the Parties to modify this Agreement and/or incorporate additional exhibits or addenda by reference.

1.5 **“Initial Term”** means the initial period of time in which Agency has elected to receive Lexipol Services.

1.6 **“Initial Term Start Date”** is specified on the cover sheet and represents the first day of the Initial Term.

1.7 **“Initial Term End Date”** is specified on the cover sheet and represents the last day of the Initial Term.

1.8 **“Lexipol Content”** means all content in any format including but not limited to written content, images, videos, data, information, and software multimedia provided by Lexipol and/or its licensors via the Services.

1.9 **“Services”** means all products and services, including but not limited to all online services, software subscriptions, content licensing, professional services, and ancillary support services as may be offered by Lexipol and/or its affiliates.

2. **Term; Renewal.** This Agreement becomes enforceable upon signature by Agency’s authorized representative, and effective as of the Initial Term Start Date. Following the Initial Term, this Agreement shall automatically renew in successive one-year periods (each, a “Renewal Term”) unless terminated as set forth herein. The Initial Term and all Renewal Terms collectively comprise the “Term” of this Agreement.

3. **Termination.**

3.1 **For Convenience; Non-Appropriation.** During the Initial Term, this Agreement may only be terminated through mutual written approval from an authorized representative of each Party. Following the Initial Term, this Agreement may be terminated by either party for convenience (including due to lack of appropriation of funds for Agency) by providing sixty (60) days written notice to the other Party. NOTE: Fees paid for Online Services are not eligible for refund, proration, or offset in the event of termination for convenience by Agency. Fees pre-paid for Professional Services may be eligible for refund, proration or offset to the extent such Services have not been delivered.

3.2 **For Cause.** This Agreement may be terminated by either party, effective immediately, (a) in the event the other party fails to discharge any material obligation, including payment obligations, or remedy any material default hereunder for a period of more than thirty (30) calendar days after it has been provided written notice of such failure or default; or (b) in the event that the other party makes an assignment for the benefit of creditors or commences or has commenced against it any proceeding in bankruptcy, insolvency or reorganization pursuant to the bankruptcy laws of any applicable jurisdiction.

3.3 **Effect of Expiration or Termination.** Upon the expiration or termination of this Agreement for any reason, Agency’s access to the Services herein shall cease unless Lexipol has, in its sole discretion, provided for their limited continuation. Termination or expiration of this Agreement shall not, however, relieve either party from any obligation or liability that has accrued under this Agreement prior to the date of such termination or expiration, including payment obligations.

4. **Fees; Invoicing.** Lexipol will invoice Agency at the commencement of the Initial Term and thirty (30) days prior to the commencement of each Renewal Term, if applicable. Agency agrees to remit payment within thirty (30) calendar days of receipt

of Lexipol's invoice. Payments may be made electronically through Lexipol's online customer portal or by mailing a check to Lexipol, LLC at PO Box 676232 Dallas, TX 75267-6232 (Attn: Accounts Receivable). Agency is responsible for all third-party fees (e.g., wire fees, bank fees, credit card processing fees) incurred when paying electronically, and such fees are in addition to those listed on Exhibit A. Lexipol reserves the right to increase fees for Renewal Terms following notice to Agency. All fee amounts stated in Exhibit A are exclusive of taxes. Unless otherwise exempt, Agency is responsible for and will pay in full all taxes related to receipt of Lexipol's Services. If Agency is exempt, it must send its exemption certificate(s) to [taxes@lexipol.com](mailto:taxes@lexipol.com).

**5. Terms of Service.** The following provisions govern access to and use of specific Lexipol's Services:

**5.1 Online Services.** Lexipol's Online Services include all online services offered by Lexipol and its partners, affiliates, and licensors. Online Services include, without limitation, Lexipol's Policy Knowledge Management System ("KMS"), Learning Management System ("LMS"), Cordico wellness application(s), GrantFinder, Virtual Instructor-Led Training, and the LEFTA Systems suite of solutions (collectively, the "Online Services"). Note: LMS Services include, but are not limited to: PoliceOne Academy, FireRescue1 Academy, EMS1 Academy, Corrections1 Academy, and LocalGovU.

**5.2 Professional Services.** Lexipol's Professional Services include those Services that are not part of Lexipol's Online Services and which require the direct, hands-on professional expertise of Lexipol personnel and/or contractors, including implementation support for policy manuals and software, technical support for online learning, accreditation consulting, grant writing, and projects requiring regular input from Lexipol's subject matter experts (collectively, "Professional Services"). Professional Services may also be referred to as "One-Time" Services on Exhibit A and may also include the provision of supplemental documentation from Lexipol's Professional Services team, either with this Agreement or during the provision of Service. NOTE: Agency is responsible for submitting all information reasonably required by Lexipol's grant writing team in a timely manner and always at least five (5) days prior to each grant application submission date. Agency is responsible for submissions of final grant applications by grant deadlines. Failure to timely submit required materials to Lexipol's grant writing team will result in rollover of project fees to next grant application cycle, not a refund of fees. Requests for cancellation of grant writing services which have already begun will result in a 50% fee of the total value of the service.

**5.3 Account Security.** Access to Lexipol's Services is personal and unique to Agency. Agency shall not assign, transfer, or provide access to Lexipol Services to any third party without Lexipol's prior written consent. Agency is responsible for maintaining the security and confidentiality of Agency's usernames and passwords and the security of Agency's accounts. Agency will immediately notify Lexipol if Agency becomes aware that any person or entity other than authorized Agency personnel has used Agency's account or Agency's usernames and/or passwords.

**5.4 Agency Data.** Lexipol's use of Agency Data is limited to providing and improving the Services, retaining records in the regular course of business, and complying with applicable legal obligations. Lexipol will use commercially reasonable efforts to ensure the security of all Agency Data, including technical and organizational measures to protect Agency Data against unauthorized or unlawful processing and against accidental loss, destruction, damage, theft, alteration or disclosure, including through measures specified by the National Institute of Standards and Technology (NIST). Lexipol's Services use the Secure Socket Layer (SSL) protocol, which encrypts information as it travels between Lexipol and Agency. However, data transmission on the internet is not always 100% secure and Lexipol cannot and does not warrant that information Agency transmits is 100% secure.

**5.5 Intellectual Property.** Lexipol's Services, and all Lexipol Content underlying such Services, are proprietary and, where applicable, protected under U.S. copyright, trademark, patent, and/or other applicable laws. When subscribing to Lexipol's Online Services, Agency and its authorized personnel receive a personal, limited, non-sublicensable and non-assignable license to access and use the Services in conformity with these Terms. Nothing contained in this Agreement, and no course of dealing, shall be construed as conferring any right of ownership to Lexipol's Services or Lexipol Content. Lexipol Content may be incorporated into Agency's final policy manuals, including beyond the Term of this Agreement, but Agency may not otherwise share Lexipol Content with private, for-profit, or commercial third parties, or commercialize Lexipol Content in any way. Agency acknowledges and agrees that Lexipol shall have no responsibility to update the Lexipol Content used by Agency beyond the Term of this Agreement and that Lexipol hereby disclaims and shall have no liability whatsoever for Agency's reliance on or use of modified or derivative forms of Lexipol Content including, without limitation, any revision, abridgement, condensation, expansion, compilation, or any other form in which Lexipol Content, or any portion thereof, is recast, transformed, adapted, or modified from its original form. NOTE: AGENCY ACKNOWLEDGES AND AGREES THAT, PRIOR TO USE AND FINAL PUBLICATION, ALL AGENCY POLICIES AND DAILY TRAINING BULLETINS (DTBs) HAVE BEEN INDIVIDUALLY REVIEWED AND ADOPTED BY AGENCY. AGENCY ACKNOWLEDGES AND AGREES THAT IT, AND NOT LEXIPOL, IS CONSIDERED THE "POLICY MAKER" WITH REGARD TO EACH AND EVERY SUCH POLICY AND DTB.

**6. Confidentiality.** Each Party may disclose information to the other Party that would be reasonably considered confidential,

including Agency Data (collectively, "Confidential Information"). Upon receiving such Confidential Information, each Party will: (a) limit disclosure of such Confidential Information to authorized representatives only; (b) advise its personnel and agents of the confidential nature of such Confidential Information and of the obligations set forth in this Agreement; and (c) not disclose any Confidential Information to any third party unless expressly authorized by the disclosing Party. Notwithstanding the foregoing, this section shall not operate to limit Agency's disclosure authority pursuant to a valid governmental, judicial, or administrative order, subpoena, regulatory request, Freedom of Information Act request, Public Records Act request, or equivalent, provided that Agency notifies Lexipol of such disclosure, to the extent practicable, such that Lexipol may seek to make such disclosure subject to a protective order or other appropriate remedy to preserve the confidentiality of Lexipol's Confidential Information and trade secrets.

**7. Warranty.** LEXIPOL WARRANTS THAT IT SHALL NOT KNOWINGLY INFRINGE THE INTELLECTUAL PROPERTY RIGHTS OF OTHERS; THAT ITS SERVICES ARE PROVIDED IN A PROFESSIONAL AND WORKMANLIKE MANNER IN ACCORDANCE WITH PREVAILING INDUSTRY STANDARDS; AND THAT THEY SHALL BE FIT FOR THE SPECIFIC PURPOSES SET FORTH HEREIN. BEYOND THE FOREGOING, LEXIPOL'S SERVICES ARE PROVIDED "AS-IS" AND LEXIPOL DISCLAIMS ALL OTHER WARRANTIES, EXPRESS, IMPLIED, OR OTHERWISE.

**8. Indemnification; Limitation of Liability.** Lexipol will indemnify, defend, and hold harmless Agency from and against any and all loss, liability, damage, claim, cost, charge, demand, fine, penalty, or expense arising directly and solely out of Lexipol's acts or omissions in providing the Services. Each Party's cumulative liability resulting from any claims, demands, or actions arising out of or relating to this Agreement shall not exceed the aggregate amount of fees paid by Agency to Lexipol during the twelve-month period immediately prior to the assertion of such claim, demand, or action. In no event shall either Party be liable for indirect, incidental, consequential, special, exemplary damages, or lost profits.

**9. General Terms.**

**9.1 Entire Agreement.** This Agreement embodies the entire agreement between the Parties and supersedes all prior agreements with respect to the subject matter hereof. No representation, promise, or statement of intention has been made by either party that is not embodied herein. Terms and conditions set forth in any purchase order or other document that are inconsistent with or in addition to the terms and conditions set forth in this Agreement are rejected in their entirety and void, regardless of when received, without further action. No amendment, modification, or supplement to this Agreement shall be binding unless it is made in writing and signed by both parties.

**9.2 General Interpretation.** The terms of this Agreement have been chosen by the parties hereto to express their mutual intent. This Agreement shall be construed equally against each party without regard to any presumption or rule requiring construction against the party who drafted this Agreement or any portion thereof.

**9.3 Invalidity of Provisions.** Each provision contained in this Agreement is distinct and severable. A declaration of invalidity or unenforceability of any provision or portion thereof shall not affect the validity or enforceability of any other provision. Should any provision or portion thereof be held to be invalid or unenforceable, the parties agree that the reviewing authority should endeavor to give effect to the parties' intention as reflected in such provision to the maximum extent possible.

**9.4 Governing Law.** Each party shall maintain compliance with all applicable laws, rules, regulations, and orders relating to its obligations pursuant to this Agreement. This Agreement shall be construed in accordance with, and governed by, the laws of the state in which Agency is located, without giving effect to any choice of law doctrine that would cause the law of any other jurisdiction to apply.

**9.5 Assignment.** This Agreement may not be assigned by either party without the prior written consent of the other. Notwithstanding the foregoing, this Agreement may be assumed by a party's successor in interest through merger, acquisition, or consolidation without additional notice or consent.

**9.6 Waiver.** Either party's failure to exercise, or delay in exercising, any right or remedy under any provision of this Agreement shall not constitute a waiver of such right or remedy.

**9.7 Notices.** Any notice required hereunder shall be in writing and shall be made by certified mail (postage prepaid) to known, authorized recipients at such address as each party may indicate from time to time. In addition, electronic mail (email) to established and authorized recipients is acceptable when acknowledged by the receiving party.



Dan Bucks  
Director

# Montana Department of Revenue



Brian Schweitzer  
Governor

RAVALLI COUNTY  
215 S 4TH ST STE B  
HAMILTON MT 59840-2703

March 22, 2008  
Acct ID: 4053527-005-CLT  
Letter ID: L1919536640

**Subject: Tax: Corporate License Tax**  
**FEIN: 81-6001417**

**RE: Non-Profit Tax-Exempt Status for RAVALLI COUNTY**

This letter acknowledges receipt of your request for non-profit tax-exempt status for your organization. Upon review of the information submitted by you, we have classified RAVALLI COUNTY as a non-profit tax-exempt entity under Montana Code Annotated, §15-31-102(1).

An organization classified as non-profit tax-exempt is only required to file a Montana Corporation License Tax Return when it has any unrelated business taxable income, as defined by section 512 of the Internal Revenue Code of 1954 (26 W.S.C. 512), as amended, resulting in a federal unrelated business income tax liability of more than \$100. In that case you would be required to file Form CLT-4, which is available online at [www.mt.gov/revenue](http://www.mt.gov/revenue) or by calling (406) 444-6900.

If you have any questions, please contact the person indicated below.

Donna Morris  
Business Tax & Valuation  
PO Box 5805, Helena, MT 59604-5805  
Phone (406) 444-7390

Customer Service (406) 444-6900 ▲ TDD (406) 444-2830 ▲ [www.mt.gov/revenue](http://www.mt.gov/revenue)