See a Social Security Number? Say Something!
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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
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)

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than $200,000 and total assets less than $500,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning , 2012, and ending , 20

B Check if applicable.
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
DANE COUNTY CONSERVATION LEAGUE

Number & street (or P.O. box, if mail is not delivered to street addr.) | Room/suite
PO BOX 44039

City or town, state or country, and ZIP + 4
MADISON WI 53744-4039

D Employer identification number
39-6081506

E Telephone number
(608)276-8469

F Group Exemption Number ▶

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶

H Check ▶ ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I **Website:** ▶ www.dcci.org

J **Tax-exempt status** (check only one) -- ☒ 501(c)(3) ☐ 501(c)( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization **and** its gross receipts are normally **not** more than $50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, line 25, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 74,046

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I ☐

REVENUE	1	Contributions, gifts, grants, and similar amounts received		1	33,787
	2	Program service revenue including government fees and contracts		2	3,753
	3	Membership dues and assessments		3	
	4	Investment income		4	5,429
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less: cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	Gaming and fundraising events			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a	17,062	
	b	Gross income from fundraising events (not including $ 6,957 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b	14,015	
	c	Less: direct expenses from gaming and fundraising events	6c	15,504	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	15,573
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less: cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶		9	58,542
EXPENSES	10	Grants and similar amounts paid (list in Schedule O)		10	7,605
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	6,648
	14	Occupancy, rent, utilities, and maintenance		14	14,402
	15	Printing, publications, postage, and shipping		15	481
	16	Other expenses (describe in Schedule O)		16	61,426
	17	**Total expenses.** Add lines 10 through 16 ▶		17	90,562
NET ASSETS	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-32,020
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	267,239
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶		21	235,219

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II ☐

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	196,134	22	169,565
23	Land and buildings	53,364	23	49,989
24	Other assets (describe in Schedule O)	17,741	24	15,665
25	**Total assets**	267,239	25	235,219
26	**Total liabilities** (describe in Schedule O)	0	26	0
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	267,239	27	235,219

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III ☒

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

What is the organization's primary exempt purpose? See attachment #1

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28 See attachment #2

(Grants $ 27,955) If this amount includes foreign grants, check here ▶ ☐ 28a 24,534

29

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 29a 1,534

30

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 30a 29,297

31 Other program services (describe in Schedule O)

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 31a 7,605

32 **Total program service expenses** (add lines 28a through 31a) ▶ 32 62,970

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated. (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099 MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, & deferred compensation	(e) Estimated amount of other compensation
See attachment #3				

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		X
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		X
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed ▶ NONE			
42a	The organization's books are in care of ▶ See attachment #4 Telephone no. ▶ Located at ▶ ZIP + 4 ▶			
b	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)? If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**	42b		X
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** -- Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			

			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		X
c	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O N/A	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		X

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

			Yes	No
47	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	47		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If "Yes," was the related organization a section 527 organization?	49b		X

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee paid more than $100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over $100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000 ▶

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶ ☐ Yes ☒ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer Donald W Sprang Date 5/9/13

▶ DON SPRANG TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
BARBARA ROSS	Barbara Ross	5/9/13		P00375214
Firm's name ▶ H AND R BLOCK			Firm's EIN ▶	300451378
Firm's address ▶ 1406 BUS HWY 18 151 E			Phone no.	608-437-5627

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☒ No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization
DANE COUNTY CONSERVATION LEAGUE

Employer identification number
39-6081506

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions--subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III-Functionally integrated **d** ☐ Type III-Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		X
(ii) A family member of a person described in (i) above?	11g(ii)		X
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		X

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	27,968	17,171	5,206	26,479	27,955	104,779
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	46,686	45,384	42,191	28,466	24,534	187,261
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	74,654	62,555	47,397	54,945	52,489	292,040
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						292,040

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	74,654	62,555	47,397	54,945	52,489	292,040
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,295	7,907	6,319	5,452	5,429	33,402
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	8,295	7,907	6,319	5,452	5,429	33,402
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	1,755					1,755
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	84,704	70,462	53,716	60,397	57,918	327,197

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	89.26 %
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	86.45 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	10.21 %
18 Investment income percentage from **2011** Schedule A, Part III, line 17	18	13.35 %

19a **33 1/3% support tests -- 2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests -- 2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 BANQUET (event type)	(b) Event #2 GOLF OUTIN (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
REVENUE	1 Gross receipts	19,212	1,760		20,972
	2 Less: Contributions	6,957			6,957
	3 Gross income (line 1 minus line 2)	12,255	1,760		14,015
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes	7,395			7,395
	6 Rent/facility costs		448		448
	7 Food and beverages	3,294	679		3,973
	8 Entertainment				
	9 Other direct expenses	1,307	9		1,316
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(13,132)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				883

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) thru col. (c))
REVENUE	1 Gross revenue			17,062	17,062
DIRECT EXPENSES	2 Cash prizes				
	3 Noncash prizes			2,347	2,347
	4 Rent/facility costs				
	5 Other direct expenses			25	25
	6 Volunteer labor	☐ Yes ____ % ☒ No	☐ Yes ____ % ☒ No	☒ Yes 100 % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				(2,372)
	8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				14,690

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☒ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☒ No

b If "Yes," explain: _____

mg

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	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.	2012 Open to Public Inspection

Name of the organization	Employer identification number
DANE COUNTY CONSERVATION LEAGUE	39-6081506

PT I LN 10 GRANTS AND SIMILAR AMOUNTS PAID:
- TWO $1000 SCHOLARSHIP AWARDED TO HIGH SCHOOL GRADUATE PURSUING HIGHER EDUCATION IN NATURAL RESOURCES OR CONSERVATION AREAS.

PT II LN 24 OTHER ASSETS:
- DEPRECIABLE LAND IMPROVEMENTS AND EQUIPMENT

PT II LN 31 OTHER PROGRAM SERVICES:
- HUNTER EDUCATION PROGRAM RECEIVED NO GRANTS OR OTHER FUNDING AND HAD NO EXPENSES. CERTIFIED INSTRUCTORS ARE STRICTLY VOLUNTEER AND RECEIVE NO COMPENSATION OR OTHER BENEFITS IN RETURN

990 PRIMARY EXEMPT PURPOSE

Attachment 1: page 1 - 990-EZ Page 2, Part III

Open to Public Inspection	For calendar year 2012 or tax period beginning , and ending .

Name of Organization	Employer Identification Number
DANE COUNTY CONSERVATION LEAGUE	39-6081506

Primary Purpose
OUTDOOR EDUCATION, LAND AND WATER CONSERVANCY, WILDLIFE HABITAT PRESERVATION, AND HUNTER EDUCATION.

990 PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: page 1 - 990-EZ Page 3, Part III

Open to Public Inspection	For calendar year 2012 or tax period beginning , and ending .

Name of Organization	Employer Identification Number
DANE COUNTY CONSERVATION LEAGUE	39-6081506

Part III - Statement of Program Service Accomplishments

Grants and allocations	27,955	Amount includes foreign grants ☐	Program service expenses	24,534

Exempt Purpose Achievements

WILDLIFE HABITAT IMPROVEMENT PROGRAM (WHIP) GRANT RECEIVED 12-19-2012 TO MANAGE BRUSH OVER 94.7 ACRES AND PROVIDE HERBACEOUS WEED CONTROL OVER 96.9 ACRES. ALL PRACTICES WERE PEFORMED AND MET THE PROGRAM REQUIREMENTS AS OF 11-30-11.

990 PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: page 2 - 990-EZ Page 3, Part III

Open to Public Inspection

For calendar year 2012 or tax period beginning , and ending .

Name of Organization	Employer Identification Number
DANE COUNTY CONSERVATION LEAGUE	39-6081506

Part III - Statement of Program Service Accomplishments

Grants and allocations	Amount includes foreign grants ☐	Program service expenses	1,534

Exempt Purpose Achievements

PRAIRIE CHICKENS HABITAT - CENTRAL WI: CONTINUED PROVIDING SUPPORT AND IMPROVEMENT OF GREATER PRAIRIE CHICKEN HABITAT AND FLOCK GROWTH IN CENTRAL WISCONSIN. THE PRAIRIE CHICKEN IS AN ENDANGERED SPECIES IN WISCONSIN.

990 PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: page 3 - 990-EZ Page 3, Part III

Open to Public Inspection

For calendar year 2012 or tax period beginning , and ending .

Name of Organization	Employer Identification Number
DANE COUNTY CONSERVATION LEAGUE	39-6081506

Part III - Statement of Program Service Accomplishments

Grants and allocations	Amount includes foreign grants ☐	Program service expenses	29,297

Exempt Purpose Achievements

RAISE PHEASANTS AND QUAIL: CONTINUE TO RAISE PHEASANTS AND QUAIL FOR RELEASE IN DANE COUNTY AND SOUTHERN WISCONSIN TO RESTOCK GAME BIRD POPULATION.

990 PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: page 4 - 990-EZ Page 3, Part III

Open to Public Inspection

For calendar year 2012 or tax period beginning , and ending .

Name of Organization	Employer Identification Number
DANE COUNTY CONSERVATION LEAGUE	39-6081506

Part III - Statement of Program Service Accomplishments

Grants and allocations	Amount includes foreign grants	Program service expenses	7,605

Exempt Purpose Achievements

EDUCATION: CONTINUE TO SUPPORT YOUTH EDUCATION AND PARTICIPATION IN CONSERVATION AND OUTDOOR RELATED ACTIVITIES. SPONSOR WISCONSIN OUTDOOR ALLIANCE YOUTH EXPO. PROVIDE SCHOLARSHIPS FOR GRADUATING HIGH SCHOOL SENIORS PURSUING HIGHER EDUCATION IN AREAS OF CONSERVANCY, NATURAL RESOURCES, OR OUTDOOR RELATED ACTIVITIES.

990 PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: page 5 - 990-EZ Page 3, Part III

Open to Public Inspection	For calendar year 2012 or tax period beginning , and ending

Name of Organization	Employer Identification Number
DANE COUNTY CONSERVATION LEAGUE	39-6081506

Part III - Statement of Program Service Accomplishments

Grants and allocations	Amount includes foreign grants ☐	Program service expenses

Exempt Purpose Achievements

HUNTER EDUCATION PROGRAM: THIS PROGRAM IS ESTABLISHED BY STATE LAW AND SUPERVISED BY WISCONSIN DNR, BUREAU OF LAW ENFORCEMENT. YOUTH MUST SUCCESSFULLY COMPLETE A HUNTER EDUCATION PROGRAM BEFORE THEY CAN PURCHASE A HUNTING LICENSE. DCCL HAS A TEAM OF CERTIFIED INSTRUCTORS THAT CONDUCT HUNTER EDUCATION PROGRAMS THROUGH FOUR TRAINING SESSIONS ANNUALLY CERTIFYING APPROXIMATELY 120 STUDENTS EACH YEAR.

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 3: page 1 - 990-EZ Page 2, Part IV

Open to Public Inspection

For calendar year 2012 or tax period beginning , and ending .

Name of Organization: DANE COUNTY CONSERVATION LEAGUE

Employer Identification Number: 39-6081506

(A) Name and Title	(B) Average hours per week devoted to postion	(C) Compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(D) Cont. to employee ben. plans & def. comp.	(E) Expense account & other compensation
ED BROST VICE PRESIDENT/DIREC	0.46			
GERRY PAFFENROTH PRESIDENT/DIRECTOR	0.75			
LOWELL CARTER SECRETARY/DIRECTOR	0.75			
DONALD SPRANG TREASURER/DIRECTOR	1.42			
DAVE PULDA DIRECTOR	0.46			
CATHY MATTS DIRECTOR	0.46			
RANDY BUISKER DIRECTOR	0.05			
EUGENE ROARK EMERITUS DIRECTOR	0.46			
DWAINE RUNDLE DIRECTOR	0.50			
ED FUSS DIRECTOR	0.46			
JACK BOND DIRECTOR	0.46			
JERRY SANDS DIRECTOR	0.46			
TOM KLINGBIEL	0.46			

990 BOOKS ARE IN CARE OF

Attachment 4 - 990-EZ Page 3, Part V, Line 42a

Open to Public Inspection

For calendar year 2012 or tax period beginning , and ending .

Name of Organization	Employer Identification Number
DANE COUNTY CONSERVATION LEAGUE	39-6081506

Part V - Line 42a

Individual Name .....

or

Business Name:

DANE COUNTY CONSERVATION LEAGUE

Street Address ..... 2511 BRANCH ST

U.S. Address:

Zip code 53562 City MIDDLETON State WI

or

Foreign Address

City .....

Province or State .....

Country .....

Postal code .....

Phone Number ..... (608)831-6486

Fax Number .....

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2012
Attachment Sequence No. **179**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
DANE COUNTY CONSERVATION LEAGUE	FOR	39-6081506

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	500,000

6	(a) Description of property	(b) Cost (busn. use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	500,000
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2012	17	4,893
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B -- Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property See Statement						557
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property			27.5 yrs.	MM	S/L	
				27.5 yrs.	MM	S/L	
i	Nonresidential real property			39 yrs.	MM	S/L	
					MM	S/L	

Section C -- Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions	22	5,450
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

7-YEAR ASSETS PLACED IN SERVICE DURING 2012
USING GENERAL DEPRECIATION SYSTEM

DANE COUNTY CONSERVATION LEAGUE
39-6081506

19c. Asset Description	(b) Date in Service	(c) Basis	(d) Period	(e) Convention	(f) Method	(g) Depreciation
DR brush mower	04-01-2012	3,400	7	HY	200 DB	486
FIMCO 25 GAL SPAYER	04-01-2012	375	7	HY	200 DB	54
TRAIL CAMERA	01-01-2012	120	7	HY	200 DB	17
					Total	557

STATEMENT #1 - Printing, publication, postage (990 EZ PG 1 Line 15)

ADMIN: COPYING	163	
ADMIN: MISC	208	
ADMIN: OFFICE SUPPLIES	5	
ADMIN: POSTAGE	105	
TOTAL CARRIED TO 990 EZ PG 1 Line 15		481

STATEMENT #2 - Contributions, gifts, grants (EZ1 Line 1)

	27,955	
DONATIONS	12	
DUES	5,820	
TOTAL CARRIED TO EZ1 Line 1		33,787

STATEMENT #3 - Prog. Service Revenue (990-EZ PG 1 Line 2)

BIRD HOUSE	405	
FARM INCOME	2,073	
SPACE RENTAL	1,275	
TOTAL CARRIED TO 990-EZ PG 1 Line 2		3,753

STATEMENT #4 - Investment Income (990-EZ PG 1 Line 4)

ANCHORBANK	512	
JOHNSON BANK	4,917	
TOTAL CARRIED TO 990-EZ PG 1 Line 4		5,429

STATEMENT #5 - Grants and similar amts paid (990-EZ PG 1 Line 10)

BRANDON MAAHS SCHOLARSHIP	1,000	
DYLAN KAHL SCHOLARSHIP	1,000	
WISCONSIN OUTDOOR EDUCATION	5,000	
UW FISHING CLUB	200	
LAKE RAKE	155	
GATHERING WATERS CONSERVANCY	250	
TOTAL CARRIED TO 990-EZ PG 1 Line 10		7,605

STATEMENT #6 - Professional Fees (990-EZ PG 1 Line 13)

WHEELER VAN SICKLE & ANDERSON GRASSLAND RESE...	6,258	
UPLANDS FINANCIAL SERVICES	390	

TOTAL CARRIED TO 990-EZ PG 1 Line 13.....	6,648

STATEMENT #7 - Occupancy, Rent, Utilities (990-EZ PG 1 Line 14)

ELECTRICITY.....	636	
EQUIPMENT.....	3,895	
EQUIPMENT MAINT.....	301	
FUEL.....	144	
HAND TOOLS.....	47	
MISC.....	2,273	
PORTA POTTY.....	260	
FLOOD PLOTS.....	86	
INSURANCE.....	1,310	
DEPRECIATION.....	5,450	
TOTAL CARRIED TO 990-EZ PG 1 Line 14.....		14,402

STATEMENT #8 - Other expenses (EOEZ Pg 1 Line 16)

ASSOCIATION DUES.....	200	
BANK FEES.....	323	
WHIP PROJECTS.....	24,534	
BIRD HOUSE COSTS.....	382	
MISC PROJECTS.....	1,152	
FARM COSTS.....	29,297	
NEWSLETTER COST/PUBLICITY.....	2,735	
DCCL CLOTHING.....	1,724	
TRAVEL EXPENSE.....	201	
WEBSITE.....	227	
MISC EXPENSE.....	160	
OPEN HOUSE COST.....	491	
TOTAL CARRIED TO EOEZ Pg 1 Line 16.....		61,426

STATEMENT #9 - Gross revenue other gaming (SCH G, PG 2 Line 1)

BANQUET RAFFLE.....	16,492	
GOLF OUTING RAFFLE.....	570	
TOTAL CARRIED TO SCH G, PG 2 Line 1.....		17,062

STATEMENT #10 - Non cash prizes other gaming (SCH G, PG 2 Line 3)

BANQUET RAFFLE.....	2,063	
GOLF OUTING RAFFLE.....	284	
TOTAL CARRIED TO SCH G, PG 2 Line 3.....		2,347