

EXTENDED TO NOVEMBER 15, 2018

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0087

2017

For calendar year 2017 or other tax year beginning and ending

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

D Employer identification number (Employees' trust, see instructions)

B Exempt under section 501(c)(3) 408(e) 220(e) 408A 530(a) 529(a)

Print or Type

FOX LAKE CONSERVATION LEAGUE INC

41-1712392

Number, street, and room or suite no. If a P.O. box, see instructions.

PO BOX 212

E Unrelated business activity codes (See instructions)

City or town, state or province, country, and ZIP or foreign postal code

SHERBURN, MN 56171

713200

C Book value of all assets at end of year

1,609,806.

F Group exemption number (See instructions.)

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. MINNESOTA LAWFUL GAMBLING

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of JIM MILLER Telephone number 507-764-2668

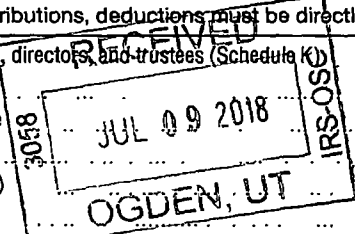
Part I Unrelated Trade or Business Income

Table with 4 columns: Line number, Description, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales (5,721,775), Less returns and allowances, Cost of goods sold, Gross profit, Capital gain net income, Net gain (loss), Income (loss) from partnerships, Rent income, Unrelated debt-financed income, Interest, annuities, royalties, and rents, Investment income, Exploited exempt activity income, Advertising income, Other income, Total combine lines 3 through 12 (747,732).

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

Table with 4 columns: Line number, Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees (59,966), Repairs and maintenance, Bad debts, Interest (attach schedule), Taxes and licenses (264,698), Charitable contributions, Depreciation (attach Form 4562), Less depreciation claimed on Schedule A and elsewhere on return, Depletion, Contributions to deferred compensation plans, Employee benefit programs, Excess exempt expenses (Schedule I), Excess readership costs (Schedule J), Other deductions (attach schedule) (SEE STATEMENT 1, 409,676), Total deductions. Add lines 14 through 28 (734,340), Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 (13,392), Net operating loss deduction (limited to the amount on line 30), Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 (13,392), Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) (1,000), Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 (12,392).



Part III Tax Computation

Table with 2 columns: Description and Amount. Rows include: 35 Organizations Taxable as Corporations, 36 Trusts Taxable at Trust Rates, 37 Proxy tax, 38 Alternative minimum tax, 39 Tax on Non-Compliant Facility Income, 40 Total. Total amount: 1,859.

Part IV Tax and Payments

Table with 2 columns: Description and Amount. Rows include: 41a Foreign tax credit, 42 Subtract line 41e from line 40, 43 Other taxes, 44 Total tax, 45a Payments, 46 Total payments, 47 Estimated tax penalty, 48 Tax due, 49 Overpayment, 50 Enter the amount of line 49 you want. Total amount: 1,918.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question, Yes, No. Rows include: 51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account... 52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? 53 Enter the amount of tax-exempt interest received or accrued during the tax year.

Sign Here: Declaration of preparer. Signature of officer: Karla Havemeier, Date: 6-30-18, Title: PRESIDENT. Paid Preparer Use Only: Print/Type preparer's name: KARLA HAVEMEIER, CPA, Signature: Karla Havemeier, Date: 06/26/18, Firm's name: KARLA HAVEMEIER, LTD, Firm's address: 107 S. BROADWAY, NEW ULM, MN 56073, Firm's EIN: 20-3836344, Phone no.: (507) 354-7699.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1	Inventory at beginning of year	1	0.	6	Inventory at end of year	6	0.
2	Purchases	2	81,508.	7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	4,974,043.
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a	Additional section 263A costs (attach schedule)	4a					
4b	Other costs (attach schedule)	4b	4,892,535.				X
5	Total. Add lines 1 through 4b	5	4,974,043.				

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1. Description of property		
(1)		
(2)		
(3)		
(4)		
2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)		(b) Total deductions. Enter here and on page 1, Part I, line 8, column (B)
0.		0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Total dividends-received deductions included in column 8			0.	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 8 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10.
Enter here and on page 1, Part I, line 8, column (A).

Add columns 6 and 11.
Enter here and on page 1, Part I, line 8, column (B).

Totals 0. 0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				

Enter here and on page 1, Part I, line 9, column (A)

Enter here and on page 1, Part I, line 9, column (B)

Totals 0. 0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						

Enter here and on page 1, Part I, line 10, col (A).

Enter here and on page 1, Part I, line 10, col. (B).

Enter here and on page 1, Part II, line 28

Totals 0. 0. 0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col 3). If a gain, compute cols 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						

Totals (carry to Part II, line (5)) 0. 0. 0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0. <small>Enter here and on page 1, Part I, line 11, col (A).</small>	0. <small>Enter here and on page 1, Part I, line 11, col (B).</small>				0. <small>Enter here and on page 1, Part II, line 27.</small>

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T OTHER DEDUCTIONS STATEMENT 1

DESCRIPTION	AMOUNT
INSURANCE, BONDS & LICENSES	1,950.
SUPPLIES & BANK CHARGES	20,823.
CASH SHORTAGES (OVERAGES)	-2,748.
RENT	140,626.
ACCOUNTING	7,711.
CONTRIBUTIONS REQUIRED BY MN STATUTE	116,014.
ELECTRONIC GAMING EXPENSE	120,822.
REPAIRS & EQUIPMENT LEASE	2,569.
DEPRECIATION	1,909.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	409,676.

FORM 990-T COST OF GOODS SOLD - OTHER COSTS STATEMENT 2

DESCRIPTION	AMOUNT
DEBIT CARD CHARGES PAID	4,892,535.
TOTAL TO FORM 990-T, SCHEDULE A, LINE 4B	4,892,535.