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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning MAR 1, 2008 and ending FEB 28, 2009

B Check if applicable: [X] Address change; [ ] Name change; [ ] Initial return; [ ] Termination; [ ] Amended return; [ ] Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: NATIONAL PROPANE GAS ASSOCIATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): 1899 L STREET, NW — Room/suite: 350

City or town, state or country, and ZIP + 4: WASHINGTON, DC 20036

D Employer identification number: 36-2087363

E Telephone number: 202-466-7200

G Gross receipts $ 7,239,704.

F Name and address of principal officer: RICHARD R. ROLDAN, SAME AS C ABOVE

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No — If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c) (6) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.NPGA.ORG

K Type of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1938 **M** State of legal domicile: NJ

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO ADVANCE SAFETY AND TO INCREASE THE USE OF PROPANE THROUGH SOUND PUBLIC POLICY.

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	140
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	140
5	Total number of employees (Part V, line 2a)	5	34
6	Total number of volunteers (estimate if necessary)	6	270
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	24,775.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	<23,228.>

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,735,787.	2,475,258.
	9	Program service revenue (Part VIII, line 2g)	2,335,688.	1,759,752.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	120,721.	76,652.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,453,371.	1,556,602.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,645,567.	5,868,264.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,537,339.	2,397,814.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	4,860,972.	3,184,755.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	7,398,311.	5,582,569.
	19	Revenue less expenses Subtract line 18 from line 12	247,256.	285,695.

			Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	5,276,285.	3,742,631.
	21	Total liabilities (Part X, line 26)	3,405,013.	2,221,202.
	22	Net assets or fund balances Subtract line 21 from line 20	1,871,272.	1,521,429.

RECEIVED JAN 21 2010 OGDEN, UT IRS-OSC 791

Part II Signature Block

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

▶ Brian Dunlap — Signature of officer — Date 1/14/2010

▶ BRIAN DUNLAP, VP FINANCE & CFO — Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ — Date 1/14/10 — Check if self-employed ▶ [ ] — Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ RSM MCGLADREY, INC. 8000 TOWERS CRESCENT DR. STE 500 VIENNA, VA 22182-6205

EIN ▶

Phone no. ▶ 703-336-6400

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

SCANNED JAN 26 2010

912,13 11

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission SEE SCHEDULE O FOR CONTINUATION
TO ADVANCE SAFETY AND TO INCREASE THE USE OF PROPANE THROUGH SOUND PUBLIC POLICY. TO ACHIEVE THIS MISSION WITH OUR MEMBERS, NPGA HAS SET THESE STRATEGIC GOALS:
-ADVANCE SAFETY THROUGHOUT THE PROPANE INDUSTRY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses $ including grants of $) (Revenue $)
GOVERNMENT AFFAIRS - TO ACHIEVE PUBLIC POLICIES THAT FAVOR PRODUCTION, DISTRIBUTION AND INCREASED USE OF PROPANE AND TO SERVE AS THE PRINCIPAL VOICE OF THE PROPANE INDUSTRY.

4b (Code) (Expenses $ including grants of $) (Revenue $)
NPGA SOUTHEASTERN CONVENTION & INTERNATIONAL PROPANE EXPO - PROVIDES A WORLD CLASS VENUE THAT SHOWCASES THE LARGEST ARRAY OF PROPANE RELATED PROVIDERS, PRODUCTS AND SERVICES. IT OFFERS THE BEST NETWORKING OPPORTUNITIES TO CONNECT THE INDUSTRY'S LEADING SUPPLIERS, MANUFACTURERS AND SERVICE PROVIDERS.
THE EDUCATIONAL PROGAM AT THE TRADE SHOW OFFERS EDUCATIONAL SESSIONS THAT PROVIDE ESSENTIAL SKILLS AND PROVEN STRATEGIES TO TAKE YOUR EMPLOYEES AND PROPANE BUSINESS TO THE NEXT LEVEL.

4c (Code) (Expenses $ including grants of $) (Revenue $)
CAPITAL AWARENESS PROGRAM - A MULTI-YEAR JOINT PARTNERSHIP BETWEEN NPGA AND THE PROPANE EDUCATION & RESEARCH COUNCIL (PERC) TO EDUCATE WASHINGTON, D.C. POLICYMAKERS ABOUT THE MANY BENEFITS OF PROPANE AND ITS MULTIPLIER EFFECT ON THE U.S. ECONOMY. THIS PROGRAM IS HIGHLIGHTED BY OUR ANNUAL PROPANE DAYS EVENT THAT BRINGS INDUSTRY MEMBERS TO WASHINGTON, DC FOR EDUCATIONAL SESSIONS AND THE OPPORTUNITY TO MEET WITH THEIR SENATORS AND REPRESENTATIVES REGARDING ISSUES IMPACTING THE PROPANE INDUSTRY.

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

4e **Total program service expenses ▶ $** *(Must equal Part IX, Line 25, column (B))*

Part IV Checklist of Required Schedules

			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4	N/A	
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5	X	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? *If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12		X
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the U S.? *If "Yes," complete Schedule F, Part I*	14b		X
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, Part II*	15		X
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, Part III*	16		X
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X
21	Did the organization report more than $5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23	X	
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 questions 24b-24d and complete Schedule K If "No", go to question 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**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*	25a	N/A	
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b	N/A	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? *If "Yes," complete Schedule L, Part IV*	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	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		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36	N/A	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable	1a 27			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 34			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b	X	
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)?		4a		X
b	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.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**	N/A			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than $75?		7a		
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	7d			
e	Did the organization, during the year, 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	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		
8	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	N/A	8		
9	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	9b		
10	**Section 501(c)(7) organizations.** Enter N/A				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter N/A				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b			

Part VI Governance, Management, and Disclosure *(Sections A, B, and C request information about policies not required by the Internal Revenue Code.)*

Section A. Governing Body and Management

			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
1a	Enter the number of voting members of the governing body (1a: 140)			
b	Enter the number of voting members that are independent (1b: 140)			
2	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		X
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		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or 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*	11		X

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision.			
a	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization? Describe the process in Schedule O (see instructions)	15b	X	
16a	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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ DC

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ▶

BRIAN DUNLAP - 202-355-1324
1899 L STREET, NW, NO. 350, WASHINGTON, DC 20036

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. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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 the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MALCOLM BARRETT CHAIRMAN	15.00	X		X				0.	0.	0.
JOE CORDILL CHAIRMAN ELECT	10.00	X		X				0.	0.	0.
ROLAND PENTA VICE CHAIRMAN	5.00	X		X				0.	0.	0.
CARL HUGHES TREASURER	5.00	X		X				0.	0.	0.
TOM AIKENS DIRECTOR	1.00	X						0.	0.	0.
D.D. ALEXANDER DIRECTOR	1.00	X						0.	0.	0.
MARK ANTON II DIRECTOR	1.00	X						0.	0.	0.
JOSEPH ARMENTANO DIRECTOR	1.00	X						0.	0.	0.
DOUG AUXIER DIRECTOR	1.00	X						0.	0.	0.
DAVID BARRETT DIRECTOR	1.00	X						0.	0.	0.
ROBERT BARRY DIRECTOR	1.00	X						0.	0.	0.
ERIC BENSON DIRECTOR	1.00	X						0.	0.	0.
JAMES BERTELSMEYER DIRECTOR	1.00	X						0.	0.	0.
ROBERT BLACKWELL DIRECTOR	1.00	X						0.	0.	0.
JOHN BLOSSMAN DIRECTOR	1.00	X						0.	0.	0.
WILLIAM BOHR DIRECTOR	1.00	X						0.	0.	0.
CHRIS BOWERS DIRECTOR	1.00	X						0.	0.	0.

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
BRADLEY BOX DIRECTOR	1.00	X						0.	0.	0.
DAVID BREED DIRECTOR	1.00	X						0.	0.	0.
JERRY BRICK DIRECTOR	1.00	X						0.	0.	0.
JOHN BROOKS III DIRECTOR	1.00	X						0.	0.	0.
JOSEPH BUSCHUR DIRECTOR	1.00	X						0.	0.	0.
B.W. BYRNE DIRECTOR	1.00	X						0.	0.	0.
CHRIS CAFARELLA DIRECTOR	1.00	X						0.	0.	0.
JACK CHESSER DIRECTOR	1.00	X						0.	0.	0.
SHAWN COADY DIRECTOR	1.00	X						0.	0.	0.
EDWIN CONGLETON DIRECTOR	1.00	X						0.	0.	0.
1b Total ▶								854,477.	0.	95,120.

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶ 6

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
VENABLE LLP PO BOX 630798, BALTIMORE, MD 21263	LEGAL FEES	405,396.
VORNADO/CHARLES E SMITH LLP PO BOX 642773, PITTSBURGH, PA 15264	OFFICE RENT	262,329.
THE BRATTLE GROUP, INC. 44 BRATTLE STREET, CAMBRIDGE, MA 02138	PROFESSIONAL FEES	194,656.
COMMERCE PLACE LOT 17 VENTURE 4826 VENTURE ROAD, LISLE, IL 60532	OFFICE RENT	182,164.
GEORGIA WORLD CONGRESS CENTER, 285 ANDREW YOUNG BLVD., NW, ATLANTA, GA 30313	EXHIBIT SPACE RENTAL	140,545.

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶ 6

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b	2,424,358.			
	c Fundraising events	1c				
	d Related organizations	1d	40,900.			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	10,000.			
	g Noncash contributions included in lines 1a-1f $					
	h Total. Add lines 1a-1f ▶		2475258.			
Program Service Revenue		Business Code				
	2a CONVENTIONS/MEETINGS		918,038.	313,308.		604,730.
	b PERC DOCKET		716,914.	716,914.		
	c MEETING SPONSORSHIPS		100,025.			100,025.
	d MEMBERSHIP PUBLICATION	541800	24,775.		24,775.	
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶		1759752.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		68,004.			68,004.
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶		397,294.			397,294.
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ▶					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	1,380,088.				
	b Less. cost or other basis and sales expenses	1,371,440.				
	c Gain or (loss)	8,648.				
	d Net gain or (loss) ▶		8,648.			8,648.
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events ▶					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities ▶					
	10a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue	Business Code				
	11a MAPL CHALLENGE INITIAT		414,064.	414,064.		
	b PROJECT MANAGEMENT REC		363,063.	363,063.		
	c MANAGEMENT CONSULTING		208,149.	208,149.		
	d All other revenue		174,032.	169,847.		4,185.
	e Total. Add lines 11a-11d ▶		1159308.			
	12 Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶		5868264.	2185345.	24,775.	1,182,886.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, 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 U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	854,477.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,096,014.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	122,580.			
9 Other employee benefits	187,353.			
10 Payroll taxes	137,390.			
11 Fees for services (non-employees):				
a Management				
b Legal	414,450.			
c Accounting	26,311.			
d Lobbying	115,679.			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	16,790.			
g Other	313,745.			
12 Advertising and promotion				
13 Office expenses	300,558.			
14 Information technology	40,216.			
15 Royalties				
16 Occupancy	265,412.			
17 Travel	291,264.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	637,365.			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	60,938.			
23 Insurance	62,497.			
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a PROJECT MANAGEMENT	308,063.			
b PRINTING & PUBLICATION	127,772.			
c CONTRIBUTIONS	84,778.			
d PERSONNEL ADMINISTRATIO	50,981.			
e BUSINESS ENTERTAINMENT	48,585.			
f All other expenses	19,351.			
25 **Total functional expenses.** Add lines 1 through 24f	5,582,569.			
26 **Joint Costs.** Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		25,694.	1	288,760.
	2	Savings and temporary cash investments		1,046,292.	2	1,204,442.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		1,163,899.	4	354,066.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		18,711.	8	16,657.
	9	Prepaid expenses and deferred charges		580,647.	9	237,057.
	10a	Land, buildings, and equipment cost basis	10a 425,251.			
	b	Less: accumulated depreciation. Complete Part VI of Schedule D	10b 339,617.	132,114.	10c	85,634.
	11	Investments - publicly traded securities		2,121,085.	11	1,353,304.
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		187,843.	15	202,711.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		5,276,285.	16	3,742,631.
Liabilities	17	Accounts payable and accrued expenses		1,885,323.	17	326,362.
	18	Grants payable			18	
	19	Deferred revenue		1,519,690.	19	1,894,840.
	20	Tax-exempt bond liabilities			20	
	21	Escrow account liability Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		3,405,013.	26	2,221,202.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,844,425.	27	1,493,335.
	28	Temporarily restricted net assets		26,847.	28	28,094.
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,871,272.	33	1,521,429.
	34	Total liabilities and net assets/fund balances		5,276,285.	34	3,742,631.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 [ ] Cash [X] Accrual [ ] Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits?	3b		

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **To be completed by organizations described below.**
▶ **Attach to Form 990 or Form 990-EZ.**

OMB No 1545-0047

2008

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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), then

- Section 501(c)(4), (5), or (6) organizations. Complete Part III.

Name of organization	Employer identification number
NATIONAL PROPANE GAS ASSOCIATION	36-2087363

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2 Political expenditures ▶ $
3 Volunteer hours

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details.

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
4a Was a correction made? ☐ Yes ☐ No
b If "Yes," describe in Part IV

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $
3 Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ▶ $
4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and 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.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule C (Form 990 or 990-EZ) 2008**

832041 12-18-08

Part II-A **To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

A Check ▶ ☐ if the filing organization belongs to an affiliated group

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. Enter -0- if line g is more than line a		
i Subtract line 1f from line 1c. Enter -0- if line f is more than line c		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B **To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

	(a) Yes	(a) No	(b) Amount
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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If "Yes," describe in Part IV			
j Total lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** See the instructions for Schedule C for details

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		X
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		X

Part III-B **To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** See Schedule C instructions for details

1 Dues, assessments and similar amounts from members	1	2,424,358.
2 Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	792,368.
b Carryover from last year	2b	
c Total	2c	792,368.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	824,282.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5	<31,914.>

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: NATIONAL PROPANE GAS ASSOCIATION

Employer identification number: 36-2087363

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or pleasure)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of certified historic structure
☐ Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ _____%

b Permanent endowment ▶ _____%

c Term endowment ▶ _____%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		54,827.	51,936.	2,891.
d Equipment				
e Other		370,424.	287,681.	82,743.
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c))* ▶				85,634.

Schedule D (Form 990) 2008

832052
12-23-08

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation· Cost or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
DEPOSITS	24,226.
INTEREST RECEIVABLES	9,640.
DEFERRED CONVENTION EXPENSES	168,845.
Total. *(Column (b) should equal Form 990, Part X, col (B) line 15)* ▶	202,711.

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,868,264.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,582,569.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	285,695.
4	Net unrealized gains (losses) on investments	4	<635,538.>
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	<635,538.>
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	<349,843.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	5,232,726.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	<635,538.>		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	<635,538.>
3	Subtract line **2e** from line **1**			3	5,868,264.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	5,868,264.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	5,582,569.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	5,582,569.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	5,582,569.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4, Part X; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

SCHEDULE J. (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: NATIONAL PROPANE GAS ASSOCIATION

Employer identification number: 36-2087363

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☒ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:			
a	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of.			
a	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule J (Form 990) 2008

832111
12-23-08

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
RICK R. ROLDAN	(i)	197,318.	28,479.	7,200.	22,697.	4,504.	260,198.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
MICHAEL G. TROOP	(i)	145,174.	0.	0.	8,770.	4,504.	158,448.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
PHILLIP A. SQUAIR	(i)	134,203.	7,500.	0.	11,955.	10,130.	163,788.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

OMB No 1545-0047
2008
Open to Public Inspection

Name of the Organization: NATIONAL PROPANE GAS ASSOCIATION

Employer Identification number: 36-2087363

Part I **Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
WILLIAM CORNELL DIRECTOR	1.00	X						0.	0.	0.
TOD CORRIN DIRECTOR	1.00	X						0.	0.	0.
BILLY COX DIRECTOR	1.00	X						0.	0.	0.
WALTER CRESSMAN DIRECTOR	1.00	X						0.	0.	0.
BRIAN DAVIDSON DIRECTOR	1.00	X						0.	0.	0.
DAVID DAY DIRECTOR	1.00	X						0.	0.	0.
DANIEL DIXON DIRECTOR	1.00	X						0.	0.	0.
DAVE DONAHUE DIRECTOR	1.00	X						0.	0.	0.
J. NUTIE DOWDLE DIRECTOR	1.00	X						0.	0.	0.
CHRISTOPHER EARHART DIRECTOR	1.00	X						0.	0.	0.
RUSTY EASTERLING DIRECTOR	1.00	X						0.	0.	0.
ED ELLIOTT DIRECTOR	1.00	X						0.	0.	0.
MIKE ERIKSEN DIRECTOR	1.00	X						0.	0.	0.
BISSELL EUGENE DIRECTOR	1.00	X						0.	0.	0.
JOHN FITZGERALD DIRECTOR	1.00	X						0.	0.	0.
GARY FRANCE DIRECTOR	1.00	X						0.	0.	0.
MICHAEL FRANGER DIRECTOR	1.00	X						0.	0.	0.
DENIS GAGNE DIRECTOR	1.00	X						0.	0.	0.
TOM GARNER DIRECTOR	1.00	X						0.	0.	0.
JOHN GAWRONSKI DIRECTOR	1.00	X						0.	0.	0.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule J-2 (Form 990) 2008

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SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047
2008
Open to Public Inspection

Name of the Organization: NATIONAL PROPANE GAS ASSOCIATION

Employer Identification number: 36-2087363

Part I **Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
STEVE GENTRY DIRECTOR	1.00	X						0.	0.	0.
DAVID GLASER DIRECTOR	1.00	X						0.	0.	0.
DWAINE GOODWIN DIRECTOR	1.00	X						0.	0.	0.
MICHAEL GORHAM DIRECTOR	1.00	X						0.	0.	0.
MAURICE GRATTON DIRECTOR	1.00	X						0.	0.	0.
WALTON GRESHAM III DIRECTOR	1.00	X						0.	0.	0.
DEAN HALDEMAN DIRECTOR	1.00	X						0.	0.	0.
SAM HALL DIRECTOR	1.00	X						0.	0.	0.
JIM HAM DIRECTOR	1.00	X						0.	0.	0.
JIM HAMILTON DIRECTOR	1.00	X						0.	0.	0.
JAMES HANCHETT DIRECTOR	1.00	X						0.	0.	0.
VANCE HARRINGTON DIRECTOR	1.00	X						0.	0.	0.
STEVEN HOLLOWAY DIRECTOR	1.00	X						0.	0.	0.
JONATHAN HOLSTEIN DIRECTOR	1.00	X						0.	0.	0.
JILL HOPKINS DIRECTOR	1.00	X						0.	0.	0.
FRANK HORNE DIRECTOR	1.00	X						0.	0.	0.
THOMAS JAENICKE DIRECTOR	1.00	X						0.	0.	0.
THEODORE JEFFCOAT DIRECTOR	1.00	X						0.	0.	0.
BILL JELLISON DIRECTOR	1.00	X						0.	0.	0.
JEFF KAMINSKI DIRECTOR	1.00	X						0.	0.	0.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule J-2 (Form 990) 2008

832201 12-18-08

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

OMB No 1545-0047
2008
Open to Public Inspection

Name of the Organization: NATIONAL PROPANE GAS ASSOCIATION

Employer Identification number: 36-2087363

Part I **Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
WAYNE KOHLEY DIRECTOR	1.00	X						0.	0.	0.
KEN KRAFT DIRECTOR	1.00	X						0.	0.	0.
RICK LADUE DIRECTOR	1.00	X						0.	0.	0.
LANCE LAM DIRECTOR	1.00	X						0.	0.	0.
ANDY LAMBERT DIRECTOR	1.00	X						0.	0.	0.
PAUL LANEY DIRECTOR	1.00	X						0.	0.	0.
WAYNE LESLIE DIRECTOR	1.00	X						0.	0.	0.
DAVID LUGAR DIRECTOR	1.00	X						0.	0.	0.
HARRY LYONS DIRECTOR	1.00	X						0.	0.	0.
ROBERT MATTOCKS II DIRECTOR	1.00	X						0.	0.	0.
ROBERT MAUCH DIRECTOR	1.00	X						0.	0.	0.
DARYL MCCLENDON DIRECTOR	1.00	X						0.	0.	0.
KEITH MCMAHAN DIRECTOR	1.00	X						0.	0.	0.
SAMUEL MCTIER DIRECTOR	1.00	X						0.	0.	0.
MICHAEL MERRILL DIRECTOR	1.00	X						0.	0.	0.
STEVEN MILLER DIRECTOR	1.00	X						0.	0.	0.
GLENN MILLER DIRECTOR	1.00	X						0.	0.	0.
GERRY MISEL DIRECTOR	1.00	X						0.	0.	0.
RON MOORE DIRECTOR	1.00	X						0.	0.	0.
MIKE MORRISSEY DIRECTOR	1.00	X						0.	0.	0.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule J-2 (Form 990) 2008

832201 12-18-08

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047
2008
Open to Public Inspection

Name of the Organization: NATIONAL PROPANE GAS ASSOCIATION

Employer Identification number: 36-2087363

Part I **Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
VIRGIL MULLINS DIRECTOR	1.00	X						0.	0.	0.
RAYMOND MURRAY DIRECTOR	1.00	X						0.	0.	0.
ROBERT NICHOLSON DIRECTOR	1.00	X						0.	0.	0.
ROBERT NICHOLSON III DIRECTOR	1.00	X						0.	0.	0.
CHARLIE ORY DIRECTOR	1.00	X						0.	0.	0.
LARRY OSGOOD DIRECTOR	1.00	X						0.	0.	0.
VINCENT OSTERMAN DIRECTOR	1.00	X						0.	0.	0.
THOMAS OVERBAUGH DIRECTOR	1.00	X						0.	0.	0.
RICK PAUL DIRECTOR	1.00	X						0.	0.	0.
TODD PELLETT DIRECTOR	1.00	X						0.	0.	0.
MARK PENNINGTON DIRECTOR	1.00	X						0.	0.	0.
MIKE PITTS DIRECTOR	1.00	X						0.	0.	0.
MIKE PIVONKA DIRECTOR	1.00	X						0.	0.	0.
D. FRANK PLATZ DIRECTOR	1.00	X						0.	0.	0.
WILLIAM PLATZ DIRECTOR	1.00	X						0.	0.	0.
HAROLD POLAND DIRECTOR	1.00	X						0.	0.	0.
LLOYD POPE DIRECTOR	1.00	X						0.	0.	0.
WILLIAM POWERS DIRECTOR	1.00	X						0.	0.	0.
TOM RAMSEY DIRECTOR	1.00	X						0.	0.	0.
TED REILLY DIRECTOR	1.00	X						0.	0.	0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047
2008
Open to Public Inspection

Name of the Organization: NATIONAL PROPANE GAS ASSOCIATION

Employer Identification number: 36-2087363

Part I **Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
DONALD REINERT DIRECTOR	1.00	X						0.	0.	0.
JAMES RESSLER DIRECTOR	1.00	X						0.	0.	0.
CHARLES REVERE DIRECTOR	1.00	X						0.	0.	0.
RUSS RIDINGS DIRECTOR	1.00	X						0.	0.	0.
MONTE ROCKOW DIRECTOR	1.00	X						0.	0.	0.
RALPH ROONEY DIRECTOR	1.00	X						0.	0.	0.
TOM ROSS DIRECTOR	1.00	X						0.	0.	0.
AL RUHL DIRECTOR	1.00	X						0.	0.	0.
KURT RUHL DIRECTOR	1.00	X						0.	0.	0.
RANDY RUTHERFORD DIRECTOR	1.00	X						0.	0.	0.
GLENN SAUNDERS DIRECTOR	1.00	X						0.	0.	0.
J. CHARLES SAWYER DIRECTOR	1.00	X						0.	0.	0.
VALERIA SCHALL DIRECTOR	1.00	X						0.	0.	0.
RICARDO SCHONDUBE DIRECTOR	1.00	X						0.	0.	0.
DON SCHULTZ DIRECTOR	1.00	X						0.	0.	0.
MICHAEL SCHWARTJE DIRECTOR	1.00	X						0.	0.	0.
JAMES SENTY DIRECTOR	1.00	X						0.	0.	0.
MICHAEL SHEEHAN DIRECTOR	1.00	X						0.	0.	0.
JANE STROUPE DIRECTOR	1.00	X						0.	0.	0.
MILT SWENSON DIRECTOR	1.00	X						0.	0.	0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

832201 12-18-08

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047
2008
Open to Public Inspection

Name of the Organization: NATIONAL PROPANE GAS ASSOCIATION

Employer Identification number: 36-2087363

Part I **Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JAMES TARANOVICH DIRECTOR	1.00	X						0.	0.	0.
RICHARD TARANTIN DIRECTOR	1.00	X						0.	0.	0.
FRANK TAYLOR DIRECTOR	1.00	X						0.	0.	0.
JEFFREY TAYLOR DIRECTOR	1.00	X						0.	0.	0.
MICHAEL TRACEY DIRECTOR	1.00	X						0.	0.	0.
MARJO VANCIL DIRECTOR	1.00	X						0.	0.	0.
STEVE VANDERBUR DIRECTOR	1.00	X						0.	0.	0.
ED VARNEY DIRECTOR	1.00	X						0.	0.	0.
KEN WATSON DIRECTOR	1.00	X						0.	0.	0.
STUART WEIDIE DIRECTOR	1.00	X						0.	0.	0.
JAY WOOD DIRECTOR	1.00	X						0.	0.	0.
LESLIE WOODWARD DIRECTOR	1.00	X						0.	0.	0.
CODY WRAY DIRECTOR	1.00	X						0.	0.	0.
RICK R. ROLDAN PRESIDENT & CEO	40.00			X				232,997.	0.	27,201.
BRIAN DUNLAP VP FIN & ADMIN & CFO	55.00			X				129,184.	0.	7,047.
MICHAEL G. TROOP VICE PRESIDENT	40.00					X		145,174.	0.	13,274.
PHILLIP A. SQUAIR SENIOR VICE PRESIDENT	40.00					X		141,703.	0.	22,085.
JENNIFER TOMB DIR -CONVENTION & MEETIN	40.00					X		102,732.	0.	8,624.
MICHAEL A. CALDARERA VICE PRESIDENT	40.00					X		102,687.	0.	16,889.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

832201 12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization: NATIONAL PROPANE GAS ASSOCIATION

Employer identification number: 36-2087363

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

-ACHIEVE PUBLIC POLICIES THAT FAVOR PRODUCTION, DISTRIBUTION AND INCREASED USE OF PROPANE.

-FOSTER INDUSTRY-WIDE COHESION - THROUGH COMMUNICATION, LEARNING, NETWORKING, AND COLLABORATION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CERTIFIED EMPLOYEE TRAINING PROGRAM.

FORM 990, PART VI, SECTION A, LINE 6: NPGA IS AN INCORPORATED 501(C)(6) NON-PROFIT TRADE ASSOCIATION. NPGA'S MEMBERSHIP IS COMPRISED OF ANY INDIVIDUAL, FIRM OR CORPORATION THAT IS ENGAGED IN THE LP-GAS INDUSTRY. AFFILIATED LOCAL, STATE OR REGIONAL PROPANE ASSOCIATIONS CAN ALSO BE MEMBERS. ACTIVE MEMBERS APPOINT AN ACCREDITED REPRESENTATIVE WHO IS AUTHORIZED TO CAST VOTES FOR SUCH ACTIVE MEMBER IN ASSOCIATION MATTERS. DIRECTORS ON THE BOARD OF DIRECTORS ARE ELECTED BY THE ACCREDITED REPRESENTATIVE FROM EACH ACTIVE MEMBER. PROPERTY RIGHTS AND INTEREST OF ACTIVE MEMBERS IN THE PROPERTY OF NPGA SHALL BE IN PROPORTION TO DUES PAID BY THEM RESPECTIVELY TO THE ASSOCIATION AND SHALL CEASE UPON THEIR EXPULSION OR WITHDRAWAL FROM THE ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 7A: VARIOUS INDUSTRY SECTIONS MEMBERS ELECT MULTIPLE DIRECTORS TO THE BOARD OF DIRECTORS AS PRESCRIBED IN NPGA'S CONSTITUTION. THE CHAIRMAN OF THE BOARD CAN APPOINT UP TO 25 DIRECTORS-AT-LARGE.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: NATIONAL PROPANE GAS ASSOCIATION

Employer identification number: 36-2087363

FORM 990, PART VI, SECTION A, LINE 7B: THE ANNUAL MEETING OF NPGA IS HELD FOR THE PURPOSE OF ELECTING OFFICERS, APPROVING THE ACTIVITIES OF THE STAFF, OFFICES AND COMMITTEES ON BEHALF OF THE ASSOCIATION DURING THE PAST YEAR AND TO RATIFY ANY AMENDMENTS TO NPGA'S CONSTITUTION PROPOSED BY THE EXECUTIVE COMMITTEE OR BY THE BOARD OF DIRECTORS DURING THE PAST YEAR.

FORM 990, PART VI, SECTION A, LINE 10: UPON RECEIVING A DRAFT COPY OF THE FORM 990 FROM THE TAX PREPARERS, THE CFO REVIEWS THE FORM 990 FOR ANY OMISSIONS OR NECESSARY UPDATES AS WELL AS TYING OUT THE FINANCIAL INFORMATION BACK TO THE AUDITED FINANCIAL STATEMENTS. NEXT, NPGA'S AUDIT COMMITTEE, A STANDING COMMITTEE OF THE BOARD OF DIRECTORS, REVIEWS THE DRAFT COPY OF THE FORM 990 DURING A CONFERENCE CALL MEETING PRIOR TO THE ACTUAL FILING WITH THE IRS. BEFORE FILING, THE BOARD OF DIRECTORS IS EMAILED A SECURED LINK TO THE FORM 990 THAT IS POSTED ON NPGA'S WEBSITE ALONG WITH A PASSWORD TO ACCESS THE FINAL FORM 990. AT THE NEXT BOARD OF DIRECTORS MEETING, THE AUDIT COMMITTEE WILL REPORT ON ITS REVIEW OF THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C: NPGA'S CONFLICT OF INTEREST POLICY IS INCLUDED IN THE FRONT SECTION OF THE EXECUTIVE COMMITTEE AND BOARD OF DIRECTOR PACKAGES ALONG WITH THE ANTITRUST POLICY AND THE WHISTLE-BLOWER POLICY. THE CHAIRMAN MAKES A REMINDER OF THESE POLICIES TO THE BOARD OF DIRECTORS IN HIS OPENING REMARKS.

FORM 990, PART VI, SECTION B, LINE 15: THE CEO'S COMPENSATION AS WELL AS OTHER OFFICER AND KEY EMPLOYEES' COMPENSATION IS REVIEWED ANNUALLY BY THE

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: NATIONAL PROPANE GAS ASSOCIATION

Employer identification number: 36-2087363

PERSONNEL SUBCOMMITTEE OF THE EXECUTIVE COMMITTEE. THE PERSONNEL SUBCOMMITTEE USES SALARY BENCHMARKS FROM PUBLICATIONS SUCH AS THE ASAE COMPENSATION GUIDE TO ASSESS THE APPROPRIATE LEVEL OF COMPENSATION FOR EACH OF THESE POSITIONS.

FORM 990, PART VI, SECTION C, LINE 19: NPGA'S GOVERNING DOCUMENTS SUCH AS THE CONSTITUTION, AND RULES & PROCEDURES ARE PRINTED IN NPGA'S MEMBERSHIP DIRECTORY. OTHER POLICIES SUCH AS THE CONFLICT OF INTEREST POLICY, THE ANTITRUST POLICY AND THE WHISTLE-BLOWER POLICY ARE INCLUDED IN THE FRONT SECTION OF THE EXECUTIVE COMMITTEE AND BOARD OF DIRECTOR PACKAGES. ALL OF THE ABOVE REFERENCED GOVERNING DOCUMENTS AND POLICIES ARE AVAILABLE UPON REQUEST. NPGA'S FINANCIAL STATEMENTS ARE PUBLISHED EACH YEAR IN NPGA'S ANNUAL REPORT WHICH IS POSTED ON NPGA'S WEBSITE. FINANCIAL STATEMENT INFORMATION IS ALSO AVAILABLE THROUGH NPGA'S ANNUAL 990 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX FORM FILINGS. COPIES OF BOTH THE ANNUAL REPORT AND 990 RETURN TAX FILINGS ARE AVAILABLE UPON REQUEST.

FORM 990, PART IV, LINE 12

ALTHOUGH THE ORGANIZATION DOES NOT RECEIVE STAND ALONE GAAP FINANCIAL STATEMENTS IT DOES RECEIVE ON AN ANNUAL BASIS FROM INDEPENDENT AUDITORS CONSOLIDATED ENTITY GAAP FINANCIAL STATEMENTS FOR IT AND ITS AFFILIATES.

SCHEDULE R
(Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**

▶ **See separate instructions.**

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization
NATIONAL PROPANE GAS ASSOCIATION

Employer identification number
36-2087363

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
NATIONAL PROPANE GAS FOUNDATION - 23-7122755 1899 L STREET, NW, SUITE 350 WASHINGTON, DC 20036	SCHOLARSHIP AWARDS	DISTRICT OF COLUMBIA	501(C)(3)	13	N/A

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule R (Form 990) 2008

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Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations? Yes	(H) No	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner? Yes	(J) No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to other organization(s)	1b		X
c Gift, grant, or capital contribution from other organization(s)	1c		X
d Loans or loan guarantees to or for other organization(s)	1d		X
e Loans or loan guarantees by other organization(s)	1e		X
f Sale of assets to other organization(s)	1f		X
g Purchase of assets from other organization(s)	1g		X
h Exchange of assets	1h		X
i Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n Sharing of paid employees	1n		X
o Reimbursement paid to other organization for expenses	1o		X
p Reimbursement paid by other organization for expenses	1p		X
q Other transfer of cash or property to other organization(s)	1q		X
r Other transfer of cash or property from other organization(s)	1r		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproportionate allocations?		(G) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Form **8868**
(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print	Name of Exempt Organization	**Employer identification number**
	NATIONAL PROPANE GAS ASSOCIATION	36-2087363
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 1150 17TH STREET NW, NO. 310	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036	

Check type of return to be filed (file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ THE ASSOCIATION 1150 17TH STREET NW, NO. 310 - WASHINGTON, DC 20036
  Telephone No. ▶ 202-466-7200 FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until OCTOBER 15, 2009, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [ ] calendar year _____ or
▶ [X] tax year beginning MAR 1, 2008, and ending FEB 28, 2009.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	$
c	**Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see Instructions.**

823831
05-26-09

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization NATIONAL PROPANE GAS ASSOCIATION	Employer identification number 36-2087363
	Number, street, and room or suite no. If a P.O. box, see instructions. 1150 17TH STREET NW, NO. 310	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036	

Check type of return to be filed (File a separate application for each return):

[X] Form 990 [ ] Form 990-EZ [ ] Form 990-T (sec. 401(a) or 408(a) trust) [ ] Form 1041-A [ ] Form 5227 [ ] Form 8870
[ ] Form 990-BL [ ] Form 990-PF [ ] Form 990-T (trust other than above) [ ] Form 4720 [ ] Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ THE ASSOCIATION 1150 17TH STREET NW, NO. 310 - WASHINGTON, DC 20036

Telephone No. ▶ 202-466-7200 FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until JANUARY 15, 2010.

5 For calendar year _____, or other tax year beginning MAR 1, 2008, and ending FEB 28, 2009.

6 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION AND FILE AN ACCURATE AND COMPLETE RETURN.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$
c	**Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Title ▶ Accountant Date ▶ 10/8/09

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05-26-09