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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 Open to Public Inspection

A F	or th	e 2009 calendar year, or tax year beginning and ending		
Вс	heck if	Please C Name of organization	D Employer identific	cation number
а	pplicab	use IRS ILLINOIS PROPANE EDUCATION AND RESEARCH		
	Addre	ess label or COTINGTI		
	Name	type	37-1	367221
一]Initial return	See All I I I I I I I I I I I I I I I I I I		
\vdash	Term	n- Specific 5.40 C. CHU CHIDEEN EDONING CE DOND EN	· ·	525-8000
⊨	Jated ∏Amer	ded tions Character and ZID 4		1,289,402.
늗	_lreturr ∏Appli		G Gross receipts \$	
	⊥tiòn pend	BFRINGFIELD, IL 02/03-3126	H(a) Is this a group re	Yes X No
		F Name and address of principal officer:RHONDA TURNER	for affiliates?	
		SAME AS C ABOVE	H(b) Are all affiliates inc	
		empt status: X 501(c) (6) ◀ (insert no) 4947(a)(1) or 527		list. (see instructions)
		te: WWW.ILPGA.ORG/IPERC	H(c) Group exemption	
		- · · · · · · · · · · · · · · · · · · ·	ear of formation: 1997 N	1 State of legal domicile: 11
Pa	ırt I	Summary		
ě	1	Briefly describe the organization's mission or most significant activities: IPERC IS		
and		ESTABLISH PROGRAMS FOR THE ADVANCEMENT OF IL		
Activities & Governance	2	Check this box if the organization discontinued its operations or disposed of m	ore than 25% of its net as	
Š	3	Number of voting members of the governing body (Part VI, line 1a)	. 3	12
ن «خ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
es	5	Total number of employees (Part V, line 2a)	5	0
<u>×</u>	6	Total number of volunteers (estimate if necessary)	6	12
Ę	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	l		Prior Year	Current Year
ω	8	Contributions and grants (Part VIII, line 1h)	565,480.	256,361.
Ž	9	Program service revenue (Part VIII, line 2g)	700,998.	1,024,899.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14,149.	8,142.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,280,627.	1,289,402.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	922,006.	1,127,918.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
w	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
Expenses	l	Professional fundraising fees (Part IX, column (A), line 11e)		
ĕ		Total fundraising expenses (Part IX, column (D), Time 25)		
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 112-29	96,924.	96,764.
	i		1,018,930.	1,224,682.
			261,697.	64,720.
es	19	[4]	Beginning of Current Year	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	673,665.	End of Year 1,057,099.
SS Is	20	Total liabilities (Part X, line 16) Total liabilities (Part X, line 26) OGDEN, UT	918.	319,632.
det und	21	Net assets or fund balances Subtract line 21 from line 20	672,747.	737,467.
	irt II		0/4/14/	131,401.
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement	nts, and to the best of my knowled	ge and belief, it is true, correct.
		and complete. Declaration of preparer (other they officer) is based on all information of which preparer has any knowle		
9 .		1. 1181°	18/22/	2 3 4 5
Sig	n	Supparture of officer	Date	2010
CHer	е	A DRANDON WADE MERCITED	54.15	
≈ ₹		BRANDON WADE, TREASURER Type or print name and title		
4		<u> </u>	Check if Prepare	er's identifying number
LPaic S	1	riepaiei 3	self- (see ins	structions)
_Pres	arer's	signature / / / // // // // // // // // // // //	employed	
LUse	Only	yours if RSM MCGLADREY, INC.	EIN ►	
NN	•	self-employed), address, and P.O. BOX 159		15 500 2000
<u>z</u>		ZP+4 SPRINGFIELD, IL 62705-0159	Phone no. ► 2	17-522-3000
May	the !	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
(19 320	01 02-	04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions.	Form 990 (2009)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2009)

ILLINOIS PROPANE EDUCATION AND RESEARCH

$\overline{}$	990 (2009) COUNCIL 37-1367	<u> 221</u>	P	age 3
Par	t 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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
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 similar funds or accounts where donors have the right to		l	
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	<u> </u>	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			l
	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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			l
	If "Yes," complete Schedule D, Part V	10	-	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	-
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	Į		
	Part VI.			ļ
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		ļ	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			1
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			l
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX.		1	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		ŀ	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	Ì		
40	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
12	Schedule D, Parts XI, XII, and XIII.	12	X	•
124	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	'2	123	
124	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1	ŀ	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1		
_	and program service activities outside the United States? 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		<u> </u>	
	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 a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
			000	(2000)

Form	990 (2009) COUNCIL 37-1367	221	Р	age 4
Pai	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States 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 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		Į	1
	Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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	ļ	
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	244		<u> </u>
LJa	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			l
	Schedule L, Part I	OFL		
oe.		25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			x
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	_26_	<u> </u>	<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			ŀ
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27	 	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	77	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	l	١.,	
	an officer, director, trustee, or direct or indirect owner? 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	1		
	contributions? If "Yes," complete Schedule M	30	<u> </u>	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			ļ
	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?		۱	
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	1	}	
	If "Yes," complete Schedule R, Part V, line 2	35	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	
	If "Yes," complete Schedule R, Part V, line 2	36	1	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1	1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	X	<u>L</u>
		Form	990	(2009)

			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			
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		
2 a	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	_		
٥-	Tax Shelter Transaction?	5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6-		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	<u>6a</u>		
U	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- 0.0		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
_	provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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?	7 f	<u> </u>	ļ
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>	ļ	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		-
ಕ	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		ŀ	
9	Sponsoring organizations maintaining donor advised funds.	8		
а	Did the organization make any taxable distributions under section 4966?	9a	1	
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<u> </u>		L
		Form	990	(2009)

Form 990 (2009)

COUNCIL

37-1367221

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body	2		
b		1		
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				
	governing body?	. <u>7a</u>	-	<u> X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	_	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:		١,,	
a	The governing body?	8a	X	<u> </u>
þ	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			7,7
2	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		T.,	
40-	Donatha average have local shorters because of the con-	40	Yes	No X
10a	·	10a	+	
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	405		
44	and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	10b	 	x
11		11	+	^
11A		400		x
12a	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	12a	+	<u> </u>
D	to conflicts?	106		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	+	
·	in Schedule O how this is done	120		
13	Does the organization have a written whistleblower policy?	13	1	<u>x</u>
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	1.7	1	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		_x_
b	Other officers or key employees of the organization	15b	1	X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
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	Ĺ	Х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶IL			
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.	ole for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fin	ancıal	
	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 organic	zation:		
	RHONDA TURNER - 217-525-8000			
	5240 S. 6TH STREET ROAD. SPRINGFIELD. IL 62703-5128			

Form 990 (2009)

COUNCIL

37-1367221

Page 7

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter 0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees, and former such persons.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours	<u> </u>	heck	(all 1	that	app	ly)	compensation from	compensation from related	amount of other
	per week	ndividual trustee or director						the	organizations	compensation
		ig i	8			ated		organization	(W-2/1099-MISC)	from the
		rustee	t frust		8	npens		(W-2/1099-MISC)		organization
		dualt	nstitutional trustee		Key employee	stcor	نة			and related
		lagiv	Instit	Officer	Key e	Highest compensated employee	Former			organizations
MICHAEL FAIVRE										
CHAIRMAN	1.00	X	<u> </u>	X	L	1_		0.	0.	0.
BRANDON WADE	1							_	_	
TREASURER	1.00	X	<u> </u>	X	<u> </u>	1_		0.	0.	0.
PHIL THOMPSON		l							_	_
SECRETARY	1.00	X	ļ	X		<u> </u>		0.	0.	0.
KASIB ABDULLAH	1	l			İ					
COUNCIL MEMBER	1.00	X	 	1	<u> </u>	├		0.	0.	0.
JOHN CAMPBELL	1									
VICE CHAIRMAN	1.00	X	├	X	-			0.	0.	0.
DOUG FOX	1 00	7.								_
COUNCIL MEMBER RANDY MILLER	1.00	X		┢		-	_	0.	0.	0.
COUNCIL MEMBER	1.00	v						0.	0.	0.
MIKE TURNER	1.00	^	┢╌	╁		+		0.	0.	<u> </u>
COUNCIL MEMBER	1.00	X						0.	0.	0.
MIKE BURGER	1.00	^	\vdash		t^-	1	-	0.	0.	•
COUNCIL MEMBER	1.00	x					}	0.	0.	0.
JIM LARKIN			<u> </u>	†		1	_	-		
COUNCIL MEMBER	1.00	$ \mathbf{x} $					-	0.	0.	0.
RIED SIMONETT		<u></u>		†	T					
COUNCIL MEMBER	1.00	X						0.	0.	0.
CHUCK UPDIKE										
COUNCIL MEMBER	1.00	X						0.	0.	0.
			$oxed{oxed}$							
								1		
			$oxed{oxed}$		<u>L</u>	L				
								1		
		<u> </u>			<u> </u>	$oxed{oxed}$				
		}								
	I	1	1	I	1	1	ı	I	I	ŀ

	(A) Name and title	(B) Average			(C Pos	-			(D) Reportable	(E) Reportable		Ec	(F) timate	ad
	Namo and the	hours					app	ly)	compensation	compensation from related	۱	an	nount other	of
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		com fr org and	pensa om th anizat d relat anizati	ation e tion ted
							_							
			-											
								-				<u></u>		<u></u>
					-									
	7-4-1					_			0.		0.			0.
	Total number of individuals (including but compensation from the organization	not limited to the	nose	liste	ed al	bov	e) wł	no re),000 in reportable				
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for			, ke	y en	nplo	yee,	or h	nighest compensated er	nployee on		3	Yes	No X
4	For any individual listed on line 1a, is the sand related organizations greater than \$1	sum of reportab 50,000? If "Yes,	le co ," co	mpl	ete S	Sch	edule	e J f	or such individual			4		x
5 Sect	Did any person listed on line 1a receive of the organization? If "Yes," complete Schettion B. Independent Contractors	•			from	any	unr	elate	ed organization for serv	ices rendered to		5		X
1	Complete this table for your five highest of the organization. NONE	ompensated in	depe	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of com	pens	ation 1	from	
	(A) Name and busines	s address							(B) Description of s	services	С	(C ompe	C) nsatio	in
					<u>.</u>						<u>. </u>			
			<u> </u>			_	•							
2	Total number of independent contractors \$100,000 in compensation from the organ		not li	mite	d to		se li: 0	sted	above) who received n	nore than				

Form 990 (2009) COUNCIL <u>37-1367221</u> Page 9 Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Unrelated Total revenue Related or excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and <u>256,361</u> similar amounts not included above ... g Noncash contributions included in lines 1a-1f \$ 256,361 h Total. Add lines 1a-1f **Business Code** 900099 1 024,899.1,024,899. 2 a ASSESSMENT REVENUE f All other program service revenue 024,899. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 8,142. 8,142 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties . (i) Real (ii) Personal 6 a Gross Rents **b** Less: rental expenses ... c Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) \triangleright 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 а b Less: direct expenses þ c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances а b Less. cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a-11d ... ,289,402.1,033,041 0. Total revenue. See instructions.

37-1367221 Page 10

Form 990 (2009) COUNCIL
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 3b, 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	-		<u> </u>	<u> </u>
	organizations in the U.S. See Part IV, line 21	1,127,918.	1,127,918.		
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				
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			· · · · · · · · · · · · · · · · · · ·	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management .	75,000.		75,000.	
b	Legal				
С	Accounting	12,460.		12,460.	
d	Lobbying _				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	364.		364.	
14	Information technology			-	
15	Royalties				
16	Occupancy	1 071		1 071	
17	Travel	1,871.		1,871.	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	3,641.		3,641.	
19	Conferences, conventions, and meetings	3,041.		3,041.	
20	Interest				
21	Payments to affiliates Depreciation, depletion, and amortization				
22	Insurance	3,428.		3,428.	
23 24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total	3,420.		3,420.	
а	•				
b					
c		-	· 		-
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,224,682.	1,127,918.	96,764.	0.
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				

Form 990 (2009)

37-1367221 Page 11

Par	t X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
1	2	Savings and temporary cash investments	568,554.	2	912,249.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	103,490.	4	143,229.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees 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	_
Assets	8	Inventories for sale or use		8	
Ä	9	Prepaid expenses and deferred charges	1,621.	9	1,621.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets .		14	
	15	Other assets See Part IV, line 11		15	
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	673,665.	16	1,057,099.
	17	Accounts payable and accrued expenses	918.	17	2,641.
	18	Grants payable		18	7,861.
	19	Deferred revenue		19	309,130.
	20	Tax-exempt bond liabilities		20	
တ္	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees	3,		
abi		highest compensated employees, and disqualified persons Complete Par	t II		
=		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties .		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	7
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	918.	26	319,632.
		Organizations that follow SFAS 117, check here X and complete	ete		
es		lines 27 through 29, and lines 33 and 34.			
SE.	27	Unrestricted net assets	672,747.	27	737,467.
3ali	28	Temporarily restricted net assets		28	
둳	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117, check here	1		
Net Assets or Fund Balances		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et .	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	672,747.		737,467.
	34	Total liabilities and net assets/fund balances .	673,665	34	1,057,099.

Form **990** (2009)

Form 990 (2009) COUNCIL 37-1367221 Page **12** Part XI Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990:
Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 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 c If "Yes" to line 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? X 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis 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 X Act and OMB Circular A-133? За

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Section 527 organizations: Complete Part I-A only

Inspection

Schedule C (Form 990 or 990-EZ) 2009

f the or	ganization answered "Yes," to	Form 990, Part IV, line 4,	or Form 990-EZ, Part VI,	line 47 (Lobbying Ac	ctivities)	, then
Sect	on 501(c)(3) organizations that	have filed Form 5768 (elect	ion under section 501(h))	Complete Part II-A. D	o not co	mplete Part II·B.
Sect	ion 501(c)(3) organizations that	have NOT filed Form 5768 ((election under section 50 ⁻	1(h)). Complete Part I	l-B. Do n	ot complete Part II-A.
f the or	ganization answered "Yes," to	Form 990, Part IV, line 5 (Proxy Tax), then			·
	ion 501(c)(4), (5), or (6) organiza					
		S PROPANE EDUC	CATION AND RES	SEARCH	Emple	oyer identification number
	COUNCIL					37-1367221
Part I		ganization is exempt	under section 501(c) or is a section	527 oi	rganization.
	vide a description of the organia		`	-		
	tical expenditures	zation s direct and indirect p	Joiltical campaign activities	Silli ditiv.	•	
	Inteer hours			•	Ψ	
3 101	inteer nours .					
Part I	-B Complete if the ord	ganization is exempt	under section 501(c	:)(3)		· -
-	er the amount of any excise tax			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	▶ \$	
	er the amount of any excise tax	· -			. •	
	ie organization incurred a section	• •	-		• •	Yes No
	s a correction made?	on 4900 tax, did it life Form	4720 for trils year?			
				•	•	└── Yes
Part I	es," describe in Part IV.	ganization is exempt	under section 501/c	avcent section	n 501/	c)(3)
	`			-		<i>0</i> ,(0).
	er the amount directly expende		•		▶\$	
	er the amount of the filing organ	nization's funds contributed	to other organizations for	section 527	. .	
	mpt function activities		. =		\$	
	al exempt function expenditures	s. Add lines 1 and 2. Enter r	nere and on Form 1120-PC)L,		
	17b				▶\$	
	the filing organization file Form	•				└─ Yes └─ No
	er the names, addresses and e	• •		_		• •
	each organization listed, enter					
	t were promptly and directly del	· · · · · · · · · · · · · · · · · · ·	•	separate segregated t	und or a	a political action committee
(PA	C) If additional space is needed	a, provide information in Pa	πιν			T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid		(e) Amount of political
				filing organizat		contributions received and promptly and directly
				funds. If none, e	nter -u	delivered to a separate
						political organization.
						If none, enter -0

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

LHA

	dule C (Form 990 or 990-EZ) 2009	COUN	CIL		504(-)(0) 1(1)	37-1	1367221 Page 2
Par	t II-A Complete if the org			npt under section	on 501(c)(3) and file	ed Form 5/68	
	(election under sec						
	eck if the filing organiza		=	- ·			
s Cr	eck Lifthe filing organiza	tion cneck	ed box A ar	nd "limited control" pr	ovisions apply.	(a) Edma	(L) Affiliated annual
			oying Expensions	nditures ints paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to infli	ence pub	lic opinion (grass roots lobbying)			
b	Total lobbying expenditures to infli	uence a le	gislative boo	dy (direct lobbying)			
C	Total lobbying expenditures (add li	nes 1a an	d 1b)				
d	Other exempt purpose expenditure	es .					
е	Total exempt purpose expenditure				,		
f	Lobbying nontaxable amount. Enter		unt from the	following table in bo	th columns		
	If the amount on line 1e, column (a) of	r (b) is:	The lob	bying nontaxable am	nount is:		
ŀ	Not over \$500,000			the amount on line 1e			
ŀ	Over \$500,000 but not over \$1,000			00 plus 15% of the ex			
ŀ	Over \$1,000,000 but not over \$1,5		· · · · · · · · · · · · · · · · · · ·	00 plus 10% of the ex			ļ
ŀ	Over \$1,500,000 but not over \$17	000,000		00 plus 5% of the exce	ess over \$1,500,000.		
l	Over \$17,000,000		\$1,000,	000.			
	Construction and the second for	1 050/ -	61 40			-	
-	Grassroots nontaxable amount (er		•	•	•		
	Subtract line 1g from line 1a If zer Subtract line 1f from line 1c. If zero		•	••			
	If there is an amount other than ze	-		line 1, did the ergani	. l ration file Form 4720		<u> </u>
J	reporting section 4911 tax for this	_	; iiil o 11101	ine 11, did the organiz	Zation file Form 4720		Yes No
	Toporting Section 45 FF tax for this	year:	4-Vear Ave	eraging Period Under	Section 501(h)		
			at made a s	ection 501(h) electio	on do not have to comp es 2a through 2f on pa		
		Lobl	ying Expe	nditures During 4-Ye	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a)	2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount						
	(150% of line 2a, column(e))						
С	Total lobbying expenditures			ļ			
	0						
_	Grassroots nontaxable amount						-
е	Grassroots ceiling amount (150% of line 2d, column (e))						
	(100% of file 2d, coldifile (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 COUNCIL 37-136722

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 37-1367221 Page 3 (election under section 501(h)).

	(a	')	(b)
	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state or				.
ocal legislation, including any attempt to influence public opinion on a legislative matter				
r referendum, through the use of:				
folunteers?				
aid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
Media advertisements?				
Mailings to members, legislators, or the public?				
bublications, or published or broadcast statements?				
Grants to other organizations for lobbying purposes?				
Direct contact with legislators, their staffs, government officials, or a legislative body?				
tallies demonstrations seminars conventions speeches lectures or any similar means?				
Other activities? If "Yes." describe in Part IV				
otal. Add lines 1c through 1i				
old the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
"Yes," enter the amount of any tax incurred under section 4912				
"Yes," enter the amount of any tax incurred by organization managers under section 4912		l		
the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	on 501(c)	(5), or se	ction	
33 1(3)(3).			Yes	No
Vere substantially all (90% or more) dues received pondeductible by members?				X
·			Y	
		-		Х
		1		
ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
rection 102(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			-
	al			
expenses for which the section 527(f) tax was paid). Current year	cal			
expenses for which the section 527(f) tax was paid).	e al	2a		•
expenses for which the section 527(f) tax was paid). Current year	:	2a 2b		
expenses for which the section 527(f) tax was paid). Current year Carryover from last year Cotal	cal	2a 2b 2c		
expenses for which the section 527(f) tax was paid). Current year Carryover from last year		2a 2b		
Expenses for which the section 527(f) tax was paid). Current year Carryover from last year Cotal Cotal Carryover amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2a 2b 2c		
Expenses for which the section 527(f) tax was paid). Current year Carryover from last year Cotal Expenses amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues frotices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception 162(e) the exception the ex		2a 2b 2c		
Expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues frotices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excluses the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid of the control of the contr		2a 2b 2c 3		
Expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues frotices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excluses the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid of the control of the contr		2a 2b 2c 3		
	colunteers? and staff or management (include compensation in expenses reported on lines 1c through 1i)? ledia advertisements?	and staff or management (include compensation in expenses reported on lines 1c through 1i)? Idelia advertisements? Idelia advertisements? Idelia advertisements, legislators, or the public? Idelia advertisements, legislators, or the public, or a legislative body? Idelia advertisements, legislators, or any similar means? Idelia activities in line 1 cause the organization to be not described in section 501(c)(3)? Idelia activities in line 1 cause the organization to be not described in section 501(c)(3)? Idelia activities in line 1 cause the organization to be not described in section 501(c)(3)? Idelia activities in line 1 cause the organization to be not described in section 501(c)(3)? Idelia activities in line 1 cause the organization to be not described in section 501(c)(3)? Idelia activities in line 1 cause the organization managers under section 4912 Idelia activities in line 1 cause the organization managers under section 4912 Idelia activities in line 1 cause the organization in managers under section 501(c)(4), section 501(c) Idelia activities in line 1 cause the organization in expensive in managers under section 4912 Idelia activities in line 1 cause the organization in expensive in line 1 cause the organization 4912 Idelia activities in line 1 cause the organization in expensive in line 1 cause the organization in line 1 cause the org	and staff or management (include compensation in expenses reported on lines 1c through 1i)? Idelia advertisements? Idelia advertisements? Idelia advertisements? Idelia advertisements, legislators, or the public? Idelia advertisements, legislators, or the public? Idelia advertisements? I	ald staff or management (include compensation in expenses reported on lines 1c through 1i)? Idelia advertisements? Idailings to members, legislators, or the public? Idilings to members, legislators, or the public? Idilings to other organizations for lobbying purposes? Idilics, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Idilics, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Idilics in line 1 cause the organization to be not described in section 501(c)(3)? Idilics in line 1 cause the organization to be not described in section 501(c)(3)? If yes, "enter the amount of any tax incurred under section 4912 If yes, "enter the amount of any tax incurred by organization managers under section 4912 If yes, "enter the amount of any tax incurred by organization managers under section 4912 If yes, "enter the amount of any tax incurred by organization managers under section 4912 If yes, "enter the amount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(5), or section 501(c)(6). If yes I

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public Inspection

Name of the organization

ILLINOIS PROPANE EDUCATION AND RESEARCH COUNCIL.

Employer identification number 37 – 1367221

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Fund	is 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 w	vriting that the assets held in donor adv	vised funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor ad	- · · · · · · · · · · · · · · · · · · ·	• • • — — • • — • • • • • • • • • • • •
•	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		Yes No
Par		anization answered "Yes" to Form 990	
1	Purpose(s) of conservation easements held by the organization		· · · · · · · · · · · · · · · · · · ·
	Preservation of land for public use (e.g., recreation or p	leasure) Preservation of an I	nistorically important land area
	Protection of natural habitat		ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the for	m of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	• •	2d
3	Number of conservation easements modified, transferred, rele		the organization during the tax
	year >		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per		of
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing conservation easements duri	ng the year 🕨 \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 1	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and exper	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describe	es the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections of	-	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, no	•	•
	treasures, or other similar assets held for public exhibition, ed		oublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these i		
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, o	r research in furtherance of public serv	ice, 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 trea		cial gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а			S
b	Assets included in Form 990, Part X		▶ \$

Sche	dule D (Form 990) 2009 COUNCIL				_			67221	
Par	t III Organizations Maintaining C	ollections of A	rt, Historic	al Treasur	es, or Oth	er Simila	ar Asset	S (continue	d)
3	Using the organization's acquisition, accessi	on, and other record	ls, check any	of the followin	g that are a s	ignificant i	use of its o	collection ite	ms
	(check all that apply)								
а	Public exhibition	d	I 🔲 Loan	or exchange p	orograms				
b	Scholarly research	е							
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they fu	ther the orga	nızatıon's exe	empt purpo	se in Part	XIV.	
5	During the year, did the organization solicit of	•	-	_					
	to be sold to raise funds rather than to be m] Yes	□ No
Par	t IV Escrow and Custodial Arran					m 990. Pa	rt IV, line 9		
	reported an amount on Form 990, Pa	- '	J			,	·	•	
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contri	butions or oth	ner assets no	t included			
	on Form 990, Part X?		•] Yes	No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:					_	
-								Amount	
С	Beginning balance					1c			
	Additions during the year				••	1d			
۵	Distributions during the year		-		•	1e			
•	Ending balance					1f			
22	Did the organization include an amount on F	orm 990 Part Y line	212					Yes	No
	If "Yes," explain the arrangement in Part XIV		, 211		•	•		J 163 L	
Par			nswered "Yes'	to Form 990.	Part IV. line	10			
		(a) Current year	(b) Prior ye				ears back	(e) Four yea	rs back
10	Beginning of year balance	(a) canone year	(5) 1 1101)	(6) 14.	o youro buon	(d) miss j	odio bdoit	(C) Tour you	TO DUCK
h	Contributions			-					
•	Net investment earnings, gains, and losses								
ا ا	Grants or scholarships								
u	•								
е	Other expenditures for facilities								
	and programs								
T	Administrative expenses								
g	End of year balance		<u> </u>			l			
2	Provide the estimated percentage of the year	ir end balance neid a							
а	Board designated or quasi-endowment		%						
b	Permanent endowment	%							
C		%							
За	Are there endowment funds not in the posse.	ession of the organiz	ation that are	neid and adm	ninistered for	tne organiz	zation	- T-	T.:-
	by.							Ye	s No
	(i) unrelated organizations					••		3a(i)	
	(ii) related organizations						•	3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	•						3b	
4	Describe in Part XIV the intended uses of the								
Par	t VI Investments - Land, Buildin		· I						
	Description of investment	(a) Cost or o) Cost or othe basis (other)		Accumulate	1	(d) Book va	due
		Dasis (Invest	ment)	Dasis (Other)	l de	preciation			
	Land	· ·							
	Buildings								
	Leasehold improvements								
	Equipment								
	Other						_		
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (B)	, line 10(c).) .					0.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 COUNCIL 37-1367221 Page 3 Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation. (b) Book value (including name of security) Cost or end-of-year market value Financial derivatives ... Closely-held equity interests Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13. (c) Method of valuation. (a) Description of investment type (b) Book value Cost or end-of-year market value Total. (Col (b) must 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 Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability (b) Amount Federal income taxes Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)____ 2. FIN 48 Footnote. 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

Schedule D (Form 990) 2009 COUNCIL 37-1367221 Page **4** Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 1,289,402. Total revenue (Form 990, Part VIII, column (A), line 12) 1,224,682. Total expenses (Form 990, Part IX, column (A), line 25) 2 64,720. 3 Excess or (deficit) for the year. Subtract line 2 from line 1 3 4 Net unrealized gains (losses) on investments 4 5 Donated services and use of facilities 5 6 Investment expenses Pnor period adjustments 7 7 8 Other (Describe in Part XIV.) Total adjustments (net). Add lines 4 through 8 9 64,720. Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1,289,402. Total revenue, gains, and other support per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 2a 2b Donated services and use of facilities Recovenes of pnor year grants 2c 2d Other (Describe in Part XIV.) Add lines 2a through 2d 1,289,402. 3 Subtract line 2e from line 1 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 Other (Describe in Part XIV.) 4h Add lines 4a and 4b 289 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1,224,682. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities ... **b** Prior year adjustments 2b 2c Other losses Other (Describe in Part XIV) 2d d Add lines 2a through 2d 2e Subtract line 2e from line 1 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 Other (Describe in Part XIV) 4b c Add lines 4a and 4b Total expenses Add lines 3 and 4c, (This must equal Form 990, Part I, line 18.) 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, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. PART X: IN JUNE 2006, THE FASB ISSUED GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES WHICH CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STATEMENTS. THIS GUIDANCE PRESCRIBES A COMPREHENSIVE MODEL FOR RECOGNIZING, MEASURING, PRESENTING AND DISCLOSING IN THE FINANCIAL STATEMENTS TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN INCLUDING POSITIONS THAT THE ORGANIZATION IS EXEMPT FROM INCOME TAXES OR NOT SUBJECT TO INCOME TAXES ON UNRELATED BUSINESS INCOME. IF THERE ARE

Schedule D (Form 990) 2009

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Open to Public Inspection

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

2 [] Employer identification number UNDING WILL SUPPORT THE 37-1367221 UNIVERSITY OF ILLINOIS TRE SERVICE INSTITUTE RELATED TO THE PROPANE LIVE LPG BURN TRAINING CONDUCTION OF CERTAIN (h) Purpose of grant UNDING WILL SUPPORT UALIFIED PROJECTS or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, o (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ILLINOIS PROPANE EDUCATION AND RESEARCH (d) Amount of 062,918 65,000 cash grant (c) IRC section if applicable 501(C)(6) Enter total number of section 501(c)(3) and government organizations 37-0775965 37-6000511 General Information on Grants and Assistance (p) EIN cnteria used to award the grants or assistance? 1 (a) Name and address of organization ILLINOIS PROPANE GAS ASSOCIATION ILLINOIS FIRE SERVICE INSTITUTE or government 6450 SOUTH 6TH STREET SPRINGFIELD, IL 62703 Name of the organization CHAMPAIGN, IL 61820 11 GERTY DR Part Part

Enter total number of other organizations

SEE PART IV FOR COLUMN (H) DESCRIPTIONS LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

Page 2

37-1367221

Schedule I (Form 990) 2009 COUNCIL

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	ide the informatio	n required in Part I,	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: IPERC	MAKES GR	GRANTS TO ES	TO ESTABLISH PROGRAMS	OGRAMS IN THE	
CONSUMER AND EMPLOYEE	SAFETY AND	TRAINING,	PUBLIC INF	INFORMATION AND	
EDUCATION ABOUT SAFE USES OF PROPANE		ESEARCH AN	AND RESEARCH AND DEVELOPMENT OF	ENT OF CLEAN,	
SAFE AND EFFICIENT PROPANE UTILIZATION.		OUTSIDE AGENCIES	NCIES CAN	CAN FILL OUT AN	
APPLICATION FOR A GRANT THAT WILL	BE	ттер то тн	SUBMITTED TO THE COUNCIL.	THESE	
APPLICATIONS ARE REVIEWED AT THE Q	QUARTERLY	MEETINGS WHERE	WHERE IT IS	S DECIDED BY	
THE BOARD MEMBERS WHETHER OR NOT I	TO FUND I	THE GRANT.	THE GRANT	APPLICATION	
STATES THE INTENT OF THE GRANT AND THIS INTENT MUST FOLLOW THE	THIS IN	TENT MUST	FOLLOW THE	GUIDELINES	
SET FORTH BY THE COUNCIL. IF ALL G	IF ALL GUIDELINES	S ARE MET,	FUNDING OF	F THE GRANT	
12-02-10					Schedule I (Form 990) 2009

ILLINOIS PROPANE EDUCATION AND RESEARCH COUNCIL 37-1367221 Page 2 Schedule I (Form 990) 2009 Part IV Supplemental Information IS APPROVED. PART II, LINE 1, COLUMN (H): NAME OF ORGANIZATION OR GOVERNMENT: ILLINOIS PROPANE GAS ASSOCIATION (H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WILL SUPPORT CONDUCTION OF CERTAIN QUALIFIED PROJECTS RELATED TO THE PROPANE INDUSTRY. NAME OF ORGANIZATION OR GOVERNMENT: ILLINOIS FIRE SERVICE INSTITUTE (H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING WILL SUPPORT THE UNIVERSITY OF ILLINOIS FIRE SERVICE INSTITUTE LIVE LPG BURN TRAINING FOR LOCAL FIRE DEPARTMENTS THROUGHOUT ILLINOIS. THE COURSE WILL CONSIST OF A ONE HOUR LECTURE ON PROPERTIES AND CHARACTERISTICS AND 3 HOURS OF HANDS-ON TRAINING IN TACTICAL HANDLING OF LPG EMERGENCIES. WE WILL ALSO CREATE A NEW ONE HUNDRED POUND CYLINDER PROP TO TRAVEL ON THE ROAD.

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Name of the organization ILLINOIS PROPANE EDUCATION AND RESEARCH

Employer identification number

		<u>UNCIL</u>									1 / - <u>1 3</u>	6/22	Τ	
Part I	Excess Benefit	Transacti	ons (s	section	n 501(c)	(3) and sectio	n 501(c)(4)	organizatio	ns only)					
	Complete if the orga	anization ansv	vered "	'Yes" e	on Form	990, Part IV,	line 25a or	25b, or For	m 990-E	Z, Part	V, line 40)b		
1	(a) Name of dis	saualified ner	on				(h) [Description (of tranca	ction			(c) Corr	ected'
	(a) Name of the	squained per					(0) 0	zescription (Ji tialisa	Clion			Yes	No
							<u>.</u>							
						-								
														
	<u> </u>					ļ					_			
	the amount of tax impon 4958	oosed on the o	organız	ation i	manage	rs or disqualif	ied persons	s during the	year un	der	▶ \$			<u>L</u>
	the amount of tax, if a	inv. on line 2.	above.	reimb	oursed b	v the organiza	ation				S			
	,	,,, ,	,	,		, · g			•					
Part II	Loans to and/o	or From Int	erest	ed P	erson	\$.								
	Complete if the orga	anization ansv	wered '	"Yes"	on Form	n 990, Part IV,	line 26, or	Form 990-E	Z, Part \	, line 38	3a			
	ame of interested	(b) Loan				inal principal	(d) Bala	ance due		In	(f) Ap	proved pard or		ntten
per	son and purpose	the orga	nizatio	n?	а	mount			defa	ult?	comn	nittee?	agree	ment?
		То	Fro	om					Yes	No	Yes	No	Yes	No
								<u>-</u>			-	ļ		ļ
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		_					<u> </u>		 		ļ	 		<u> </u>
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		_L	L	1								<u> </u>		
otal Part III	Grants or Assis	stance Bei	nefitii	na In	terest	ed Person				-	1			
	Complete if the org			_										
	(a) Name of interested		Weieu			tionship betw		sted person	and	<u> </u>	(c) An	nount an	d type o	ıf
	(u)	. ролоо			(2)		ganization		4,76			assistan		•
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								•						
5-4 K /	Dunings Trans			I	-1	And Dawson								
Part IV	Business Trans			_										
	Complete if the org		wered '					1					(e) Sha	arına o
	(a) Name of interested	person				hip between i nd the organi		(c) Amo transa			Descrip transact		organız rever	zation's nues?
T 0111	DI DITTINO			are.	***	OH 2000	D3 ===			-	```	mirro	Yes	No
ICHA	EL TURNER			250	USE	OF RHON	IDA TU		0	·KH	AUNC	TURN		X
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O

Supplemental Information to Form 990

(Form 990)

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

ILLINOIS PROPANE EDUCATION AND RESEARCH **Employer identification number** Name of the organization 37-1367221 COUNCIL FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: IN THE AREAS OF CONSUMER AND EMPLOYEE SAFETY AND TRAINING, PUBLIC INFORMATION AND EDUCATION ABOUT SAFETY AND OTHER ISSUES WITH THE USE OF PROPANE, AND RESEARCH AND DEVELOPMENT OF CLEAN, SAFE AND EFFICIENT PROPANE UTILIZATION EOUIPMENT. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: USE OF PROPANE EQUIPMENT, RAISING THE PROFESSIONAL LEVEL IN THE INDUSTRY THROUGH EMPLOYEE SAFETY TRAINING AND EDUCATION, AND PROMOTING CONTINUED RESEARCH AND DEVELOPMENT OF CLEAN, EFFICIENT PROPANE EQUIPMENT. FORM 990, PART VI, SECTION A, LINE 2: RHONDA TURNER, SPOUSE OF MIKE TURNER, IS THE EXECUTIVE VICE PRESIDENT OF THE ILLINOIS PROPANE GAS ASSOCIATION (IPGA), WHICH HAS ESTABLISHED AN ADMINISTRATIVE AGREEMENT WITH IPGA. FORM 990, PART VI, SECTION A, LINE 3: ILLINOIS PROPANE GAS ASSOCIATION PROVIDES MANAGEMENT AND ADMINISTRATIVE SERVICES TO ILLINOIS PROPANE EDUCATION AND RESEARCH COUNCIL. EITHER PARTY MAY CANCEL THE MANAGEMENT AGREEMENT WITH 90 DAYS ADVANCE WRITTEN NOTICE. FORM 990, PART VI, SECTION B, LINE 11: THE IPERC TREASURER REVIEWS THE FORM 990 PRIOR TO FILING.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

ILLINOIS PROPANE EDUCATION AND RESEARCH Name of the organization **Employer identification number** 37-1367221 COUNCIL BE MADE AVAILABLE TO THE PUBLIC. FORM 990, PAGE 12, PART XI, LINE 2C OVERSIGHT AND SELECTION OF INDEPENDENT ACCOUNTANT THE OVERSIGHT AND SELECTION PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: MICHAEL TURNER (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: SPOUSE OF RHONDA TURNER (D) DESCRIPTION OF TRANSACTION: RHONDA TURNER IS EXECUTIVE VICE PRESIDENT OF THE ILLINOIS PROPANE GAS ASSOCIATION WHICH HAS ESTABLISHED AN ADMINISTRATIVE AGREEMENT WITH IPERC. FORM 990, PART I, LINE 6: THE "ACT" PROVIDES THAT THE COUNCIL BE MADE UP OF 12 MEMBERS WITH 6 MEMBERS REPRESENTING RETAIL MARKETERS, 4 MEMBERS REPRESENTING PRODUCERS, AND 2 PUBLIC MEMBERS. FORM 990, PAGE 6, PART VI, SECTION B, LINE 15 A & B COMPENSATION DETERMINATION THIS IS NOT APPLICABLE SINCE IPERC HAS NO EMPLOYEES.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2009 Open to Public Inspection OMB No 1545-0047

Employer identification number

37-1367221

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) ILLINOIS PROPANE EDUCATION AND RESEARCH ▶ Attach to Form 990. COUNCIL Name of the organization Department of the Treasury Internal Revenue Service Part I

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets **e** Total income € Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part II

Direct controlling status (if section Public charity 501(c)(3)) Exempt Code section 501(C)(6) Legal domicile (state or foreign country) TLINOIS MANAGEMENT SERVICES FOR THE RESEARCH, DEVELOPMENT & Primary activity PROPANE INDUSTRY 37-0775965, 5240 S 6TH STREET ROAD ILLINOIS PROPANE GAS ASSOCIATION Name, address, and EIN of related organization SPRINGFIELD IL 62703

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

Schedule R (Form 990) 2009

932161 02-04-10

COUNCIL Schedule R (Form 990) 2009

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Page 2

37-1367221

- 1

(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, unrelated, excluded from tavinder sections 512-514)		(f) Share of total income	(g) Share of end-of-year assets		(h) Disproportion- ate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing Partner?
								<u>'</u>			
Part IV Identification of Related Org	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)	poration or year)	Trust (Complete if t	he organizatio	ın answered "Y	es" to Form 9	90, Part IV	line 34 b	ecause it h	ad one or mor	e related
(a) Name, address, and EIN of related organization	Z c	P.	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	(d) Type of entity (C corp., S corp, or trust)		(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership
									_		
							•				
932162 02-04-10								<u>:</u>	Sch	Schedule R (Form 990) 2009	990) 2009

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Page 3.

ILLINOIS PROPANE EDUCATION AND RESEARCH

Schedule R (Form 990) 2009 COUNCIL

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		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?		1	1
 a Receipt of (i) interest (ii) annuities (iii) royalties or (iiv) rent from a controlled entity b Gift, grant, or capital contribution to other organization(s) 		1a X	1
c Gift, grant, or capital contribution from other organization(s)	•	1c X	
d Loans or loan guarantees to or for other organization(s)		1d ×	
e Loans or loan guarantees by other organization(s)		1e X	• 1
			ı
f Sale of assets to other organization(s)		×	ı
g Purchase of assets from other organization(s)		1g	ı
h Exchange of assets		÷	ı
i Lease of facilities, equipment, or other assets to other organization(s)	:	i.	
			ı
		4 >	1
k Performance of services or membership or fundraising solicitations for other organization(s)	•	¥ 7	ı
Penormance of services of membership of fundraising solicitations by other organization(s)			ı
_			ı
n sharing of paid employees .		4	ı
o Reimbursement paid to other organization for expenses		10 X	ı
		d d	
		`	
q Other transfer of cash or property to other organization(s)	:	Tq X	1 1
		+ ×	1
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	saction thresholds.		1
(а) Name of other organization(s)	(b) Transaction	(c) Amount involved	
	type (a-r)		ı
			ı
			1
(3)			1
(4)			1
(c)			ı
(9)			ı
932 163 02-04-10	Sche	Schedule R (Form 990) 2009	

Page 4.

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ILLINOIS PROPANE EDUCATION AND RESEARCH

Schedule R (Form 990) 2009 COUNCIL

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

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.

Schedule R (Form 990) 2009

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

	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box		. ► LX1							
-	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		00C0							
	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	iea For	III 0000.							
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)									
A cor	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	nplete								
Part I	only		▶ 🗀							
	ner corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request al Income tax returns.	n exten	sion of time							
noted (not a you n	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron utomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or constant the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic films gov/efile and click on e-file for Chanties & Nonprofits	ically if insolida	(1) you want the additional ated Form 990-T. Instead,							
Туре	or Name of Exempt Organization	Emp	oyer identification number							
print	ILLINOIS PROPANE EDUCATION AND RESEARCH									
File by	COUNCIL	3	7-1367221							
due dat filing yo return	e for Number, street, and room or suite no. If a P.O. box, see instructions. 5240 S. 6TH STREET FRONTAGE ROAD EAST									
instruct	See									
Chec	k type of return to be filed (file a separate application for each return).									
\mathbf{x}	Form 990 Form 990-T (corporation) Form 4	720								
	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5	227								
	Form 990-EZ Form 990-T (trust other than above) Form 6	069								
	Form 990-PF	870								
	RHONDA TURNER									
• Th	e books are in the care of > 5240 S. 6TH STREET ROAD - SPRINGFIELD,	ΙL	62703-5128							
	lephone No. ▶ 217-525-8000 FAX No. ▶									
• If 1	he organization does not have an office or place of business in the United States, check this box		▶ □							
• If t	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the									
box	▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all	memb	ers 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 un AUGUST 15, 2010 , to file the exempt organization return for the organization named		The extension							
	is for the organization's return for:									
	▼ X calendar year 2009 or									
	tax year beginning, and ending		_·							
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		_							
b	nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	\$							
U	tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$							
С	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	1								
-	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).									
	See instructions.	3c	s N/A							
	ion. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	. 0070	FO for a command in the colored							