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Department of the Treasury

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

➤ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

Inte	nal Reven	ue Service	<u> </u>	The organization may ha	ve to use a copy of	this return to satis	fy state report	ing requirement	s		nspection
A	For th	e 2009 calen	dar year,	or tax year beginning	<u> </u>		, and	l ending			_
<u>B</u> _	Check	if applicable	Please	C Name of organization	on				D Employ	er ident	ification number
L_	Address	s change	use IRS					EL NOTO:	i		
	Name o	change	label or	AMERICAN CHEM				IEMISTRY_			3054150
	Initial re	-	print or	Number and street (or F	O box, if mail is not de	elivered to street addr	ress)	Room/suite	E Teleph	ione nu	ımber
┝			type. See	AAA ACADEMIC A	TUITIES DI III	DINO				(04.4)	000 7000
<u> </u>	Termina		Specific	411 ACADEMIC AC							865-7839
<u>_</u>	Amend	ed return	Instruc-	City, town, or countr	У	State	ZIP	+ 4	F Group	Exemp	otion
L	Applica	tion pending	tions.	UNIVERSITY PARI	K	_ PA	16	802	Numb	er	.▶
•	Section	n 501(c)(3) o	rganizatio	ons and 4947(a)(1) no	nexempt charita	ble trusts mus	t attach	G Accountii	na Method	X	Cash Accrual
		. ,, ,	_	leted Schedule A (For	•				ecify)		,
_								H Check▶		organi	zation is not
,	Wehsit	e ► http://	lae www	gov/PCS/acfuel/							e B (Form 990,
٠.						4047(0)(4) 05	527		or 990-PF)		C D (1 01111 000,
		mpt status (che				4947(a)(1) or		<u> </u>			
K	Check			ion is not a section 509							
_	A Form	990-EZ or Fo	orm 990 re	eturn is not required, b	ut if the organizat	tion chooses to	file a return,	be sure to file	a comple	te retur	n
L	Add lines	s 5b, 6b, and 7t	o, to line 9 to	o determine gross receipts	s, if \$500,000 or mo	re, file Form 990 i	nstead of For	m 990-EZ		\$	174,046
Ρ	art l	Revenue	Expens	ses, and Changes	s in Net Asse	ts or Fund E	<u> Balances (</u>	See the ins	structions	for P	art I.)
	1	Contributio	ns, gifts,	grants, and similar a	mounts receive	ed				1	. 8,500
	2	Program se	ervice rev	venue including gove	ernment fees an	d contracts			[]	2	36,174
	3	_		ind assessments .					. 🗔	3	. 20,442
	4	Investment	•							4	4,793
_	5a			sale of assets other	than inventory		5a	10	04.137		
3	b			basis and sales expe	-	. ,	5b		72,596	· [
20	C			sale of assets other		Subtract line !				c	31,541
20	6			es (complete applicable par					\vdash	- -	<u></u>
e E	ر			including \$		contributions	nganing, cie	CK HEIE	ㅁ	1	
-8	а	reported or				CONTINUULIONS	احما		. 0.		
JUN 28 2010	.					• •	. 6a			∸ †	
-	b			es other than fundra		 		- C-V	—∸" ;		
SCANNED	70) from special events		Subtract line	1 _ 1	e 6a)	. ⊢.	<u>c </u>	U
씾	7a			ntory, less returns ar	id allowances		7a			1	
Ē	b	Less: cost	-		 		7b.	<u> </u>		_	
₹	C) from sales of inven	tory (Subtract II	ine /b irom iin	e /a).			C	. <u>D</u>
ပ္က	8	Other rever							—' —	3	0
<u>(1)</u>	9			l lines 1, 2, 3, 4, 5c, 6		· · ·		<u> </u>		9	101,450
	10			amounts paid (attach	schedule)		Di	-0EW =		0 .	<u> </u>
	11	•		or members			. K	CEIVE	D LI	1	
es	12			pensation, and empl	•					<u>2</u> .	
enses	13			nd other payments to	•	ontractors .	5 . WA	V '11 '0 ada		3	4,781
ğ	14			ilities, and maintena			INIM	Y 18 2010		4	
Exp	15			s, postage, and ship					221	5 .	24,300
	16	Other expe	nses (de	scribe > See Attac	ched Statement		0	DEALL	三面	6	36,306
_	17			dd lines 10 through 1				- A B		7	. 65,387
Ŋ	18	Excess or ((deficit) fo	or the year (Subtract	line 17 from lin	e 9)		•	. 1	8	36,063
set	19	Net assets	or fund b	palances at beginning	g of year (from	line 27, colum	n (A)) (mus	st agree with			
Ą		end-of-yea	r figure re	eported on prior year	's return) .				1	9 .	. 285,070
Net Assets	20			et assets or fund bala		xplanation)				0	71,109
ž	21			palances at end of ye			1 20		▶2		392,242
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ											
_				the instructions for P		, , , , , , , , , , , , , , , , , , , ,			ning of year		(B) End of year
22	Cash	, savings, ar	•						285,070	22	392,242
23		and building				•		T		23	
24		assets (des		•	•		,		0	24	0
25		assets							285,070		. 392,242
26		liabilities (describe	.			, , ,	·	0 200,070	26	0
				ices (line 27 of colum	nn (B) must an	ree with line 2	1)		285,070		392,242
					1-,						

Form 990-EZ (2009)

Form	990-EZ (2009) AMERICAN CHEMICAL SO	OCIETY DIVISIO	N OF FUEL	CHEMISTRY	52	-605	4150	Page 2	2
Pa	rt III Statement of Program Service Ac	complishment	s (See the	instructions for P				Expenses	_
	t is the organization's primary exempt purpose?							ured for section	
	cribe what was achieved in carrying out the organ)(3) and 501(c)(4)	
	ner, describe the services provided, the number of					•		izations and section	
	n program title.	or persons benefit	eu, and othe	or relevant informa	1011 10	,	for ot	(a)(1) trusts, optional	
28	r program title.			···			10, 00	T	-
20					• • • • •		ł		
		• • • • • • • • • • • • • • • • • • • •					1		
						 -	Į l		
	(Grants \$ 0) If this amou	int includes foreig	in grants, ch	eck here	<u> </u>	<u> </u>	28a	· (<u>2</u>
29									
				•••••		•••	J		
	(Grants \$ 0) If this amou	int includes foreic	in grants ch	eck here	. •	\Box	29a	Ι ,)
20						<u></u>	23a	<u> </u>	_
30									
	(Grants \$ 0) If this amou	unt includes foreig	ın grants, ch	eck here	. ▶	<u> </u>	30a	(<u>)</u>
31	Other program services (attach schedule) .			· .	•			·	_
	(Grants \$ 0) If this amou	ant includes foreig	ın arants, ch	eck here	. ▶	\prod	31a		2
22	Total program service expenses. (add lines 28		<u>,g,</u>			౼	. 32		<u>-</u>
						· · ·		<u>`</u>	_
Pa	rt IV List of Officers, Directors, Trustees,	(b) Title and		one even if not compe (c) Compensation		Contribut		(e) Expense	_
	(a) Name and address	hours per		(If not paid,			oons to ifit plans &		
		devoted to		enter -0)			ensation	other allowances	_
CHA	RLES E TAYLOR	Title CHAIR							
	BOX 10940 PITTSBURGH PA 15236	Hr/WK	2 00	l o	l		0	ا)
	ID L KING	Title SECRET							Ĺ
		-1		_]		^] ,	_
	BOX 999 RICHLAND WA 99352	Hr/WK	2 00	0	├		0	<u> </u>	<u>0</u>
	IGSHENG CHEN	_ Title TREAS							
<u> 155</u>	HOSLER UNIVERSITY PARK PA 16802	Hr/WK	2 0 <u>0</u>	0			0	<u> </u>	<u>2</u>
		Title							_
		Hr/WK	00	O	1		0	1	0
		Title	<u></u>		<u> </u>				<u>-</u>
		7	00	,	Į		_	Ι ,	_
		Hr/WK	.00	0			0	<u> </u>	<u>2</u>
		- Title							
		Hr/WK	00	0			0		<u>)</u>
		Title			ļ				
		Hr/WK	00	0	ł		0	l ()
	 	Title							_
		1	00	O			0	(١
		Hr/WK	00	ļ	-			 	_
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		Hr/WK	00	0			0		<u>)</u>
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<i>-</i>	·	Hr/WK	.00	o			0	، ا	0
			.00		- -		<u> </u>	-	<u>-</u>
		- Title		_			_		_
		Hr/WK	00	0			0		<u>)</u>
	*	Title							
		Hr/WK	.00	0	L		0		<u>)</u>
		Title							_
		Hr/WK	00	o			0)
			- 00		 			 	<u>-</u>
		_ Title		=	\		_		•
		Hr/WK	00	0	<u> </u>		0	ļ	<u>)</u>
-		Title							
		Hr/WK	00	0			0		<u>)</u>
		Title							_
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			.00		 			 	<u>-</u>
-		- Title		_			_] .	_
		l Hr/WK	00		1		Ω	ı ()

Part	V Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed			1
	description of each activity	33		<u> </u>
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of			
	the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but			
	not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T	<u> </u>		
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section			
	6033(e) notice, reporting, and proxy tax requirements?	35a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			١
	during the year? If "Yes," complete applicable parts of Schedule N	36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions	<u> </u>		
	Did the organization file Form 1120-POL for this year?	37b		⊢—
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		. X
	If "Yes," complete Schedule L, Part II and enter the total amount involved	· ·	•	
39	Section 501(c)(7) organizations Enter			
	Initiation fees and capital contributions included on line 9	٠.		١.
	Gross receipts, included on line 9, for public use of club facilities	ł	•	١.
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.]		ļ
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			İ
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified			
	person in a prior year, and that the transaction has not been reported on any of the organization's prior			
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	-	X
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on	l		
	organization managers or disqualified persons during the year under sections 4912,			
A	4955, and 4958	ŀ		
u				ĺ
۵	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	٠.	, ,	1
-	transaction? If "Yes," complete Form 8886-T.	.40e		
41	List the states with which a copy of this return is filed	100	ـــــــا	
		/01 <i>4</i> \ 1	DEE 00	
42 a				
	Located at ► 155 HOSLER BLDG City UNIVERSITY PARK ST PA ZIP + 4 ►		16802	
D	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Vaa	
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	404	Yes	No
	account)?	42b		X
	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.			ĺ
_	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	├ ──	X
C	If "Yes," enter the name of the foreign country.	726	•	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶
	and enter the amount of tax-exempt interest received or accrued during the tax year . ▶ 43 N/A	•		
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			_ <u></u>
	Form 990-EZ	. 44		. X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			广
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		X
			90-EZ	

Form 9	00-EZ (2009) AMERICAN CHEMICAL SOCI	ETY DIVISION OF FUEL CH	EMISTRY	52-	6054150	Page 4
Part	VI Section 501(c)(3) organizations and	section 4947(a)(1) nonex	empt charitable	trusts only. All s	ection	
	501(c)(3) organizations and section 494	17(a)(1) nonexempt charita	able trusts must a	inswer questions	46-49b	
	and complete the tables for lines 50 and	d 51.				
46	Did the organization engage in direct or indirect p	olitical campaign activities or	behalf of or in opp	osition to	Yes	No
	candidates for public office? If "Yes," complete So				46	<u> </u>
47	Did the organization engage in lobbying activities	·			47	<u>X.</u>
48	Is the organization a school as described in section			Ε., .	48	<u>X</u> .
	Did the organization make any transfers to an exe	•	rganization? .		49a .	X
	If "Yes," was the related organization a section 52	_			49b .	<u></u>
50	Complete this table for the organization's five high					
	employees) who each received more than \$100,0		<u> </u>			
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Exper account a other allowa	and
Name	None Str	Title				
City	ST ZIP	Hr/WK 00	0	0		0
Name	Str	Title				
City	ST ZIP	Hr/WK 00	0	0		0
Name	Str	Title				
City	ST ZIP	Hr/WK 00	0	0		0
Name	Str	Title		_:	•	
City	ST ZIP	Hr/WK 00	0	0		0
Name	Str	Title				_
City f	ST ZIP Total number of other employees paid over \$100,	Hr/WK 00	0	0		0
	\$100,000 of compensation from the organization (a) Name and address of each independent contractor			e of service	(c) Compensa	
Name	None Str					
City	ST	ZIP				
Name	Str					
City	ST	ZIP				
Name						
City	ST ST	ZIP				
Name	Str	710				
City	Str Str	ZIP	- 			
<u>Name</u> City	ST	ZIP				
	Total number of other independent contractors ea		, . >			
	Under penalties of perjury, I declare that I have examine		•	•		
	and belief, it is true, correct, and complete Declaration	ot preparer (other than officer) is bas	ed on all information of v		_	
Sign	y ching Chen			1 5/13/1	<u> </u>	
Неге	Signature of officer			Date		
	Yongsheng Chen					
	Type or print name and title	10-1-	10000			
Paid	Preparer's	Date	Check if self-	Preparer's identif	ying number (See	instructions)
. u. Prepa	rer's Firm's name (or yours A LLS ACCTO & FIN S		/2010 employed t			
Use O	nly if self-employed).			EIN ► 25-15		
	address, and ZIP + 4 1333 S ALLEN STRI	EET #1, STATE COLLEGE, I	PA 16801		237-8087	
May t	ne IRS discuss this return with the preparer showr	above? See instructions.	<u> </u>	<u></u> ▶	X Yes .	No
					Form 990-E	Z (2009)

SCHEDULE A (Form 990 or 990-EZ)

Denartment of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number AMERICAN CHEMICAL SOCIETY DIVISION OF FUEL CHEMISTRY 52-6054150 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III-Functionally integrated Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? . . . 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(üi) Provide the following information about the supported organization(s) (iil) Type of organization (Iv) Is the organization (v) Did you notify (vi) is the (vii) Amount of (i) Name of supported (ii) FIN (described on lines 1-9 in col (i) listed in your the organization in organization in col support organization above or IRC section governing document? col (i) of your (i) organized in the (see instructions) US? support? Yes Yes No Yes No 0 0 0 0

0

0

Total

AMERICAN CHEMICAL SOCIETY DIVISION OF FUEL CHEMISTRY Schedule A (Form 990 or 990-EZ) 2009 52-6054150 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (a) 2005 Calendar year (or fiscal year beginning in) ▶ (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") 0 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 Total. Add lines 1 through 3 0 0 0 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). Public support. Subtract line 5 from line 4 0 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 .0 0 0 0 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar sources 0 . . . Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV). 11 Total support. Add lines 7 through 10 Ω Gross receipts from related activities, etc (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 0 00% 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 0.00% 33 1/3% support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 16a b 33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10%

.

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

800	(Complete only if you checked t tion A. Public Support	he box on line	9 of Part I.)				
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
		(u) 2000	(8) 2000	(6) 2001	(u) 2000	(e) 2003	(i) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	43,279	69,236	. 34,545	21,011	28,492	. 196,563
_	• • •	40,275	03,230	. 54,545	21,011	20,492	. 130,505
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose .	13,628	8,732	15,578	. 30,113	36,174	104,225
3	Gross receipts from activities that are not an	. <u>. 10,020</u>	D,702		. 30,113	30,124	104,225
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
_	its behalf	0	0	<u> </u>			. 0
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge	. 0	0				0
6	Total. Add lines 1 through 5	56,907.	77,968	50,123	51,124	64,666	300,788
	Amounts included on lines 1, 2, and 3	- 00,007.	77,500		31,124	04,000	300,788
	received from disqualified persons						. 0
	• •						<u>.</u>
D	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
С	Add lines 7a and 7b	. 0	a	o	0	0	0
8	Public support (Subtract line 7c from						· · · · · · ·
	line 6)		<u> </u>				300,788
	tion B. Total Support					————	
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	56,907	77,968	50,123	51,124	. 64,666	300,788
10a	Gross income from interest, dividends,						
	payments received on securities loans,					İ	
	rents, royalties and income from similar sources.	. 3,423	0.007	5 047	4 700	4 700	04.050
b		. 3,4∠3	. 3,687	5,317	. 4,733	4,793	21,953
_	section 511 taxes) from businesses						
	acquired after June 30, 1975	. 1	.		.		0
C	Add lines 10a and 10b	3,423	3,687	5,317	4,733	. 4,793	2.1,953
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly					İ	•
12	carried on		• •	· · · · · ·			0
-	loss from the sale of capital assets						
	(Explain in Part IV.)	ol	ol	-			0
13	Total support. (Add lines 9, 10c, 11,	-					
	and 12)	. 60,330	81,655	55,440	55,857	69,459	. 322,741
14	First five years. If the Form 990 is for the org	anızatıon's firs	t, second, third	, fourth, or fifth	tax year as a	section 501(c)(3)
_	organization, check this box and stop here		• •		·		▶
	tion C. Computation of Public Support						
15	Public support percentage for 2009 (line 8, co			olumn (f)) .		.15 .	. 93 20%
16 Sect	Public support percentage from 2008 Schedu		16 .	.87 81%			
	tion D. Computation of Investment Inco				1	45	
17 18	Investment income percentage for 2009 (line Investment income percentage from 2008 Sci			e 13, column (f	"	. 17	6 80%
19a	33 1/3% support tests—2009. If the organization			line 14. and lin	[18	12 19%
	not more than 33 1/3%, check this box and st						u line 17 is ► X
b	33 1/3% support tests-2008. If the organization di						P [A]
	line 18 is not more than 33 1/3%, check this box ar						.▶ □
20	Private foundation. If the organization did no						▶□

Schedule A (Form 9	990 or 990-EZ) 2009	AMERICAN	CHEMICAL:	SOCIETY	<u>DIVISION OF</u>	FUEL CHEMISTRY	52-6054150	Page 4
Part IV	Supplemental					e explanations required		
	Part II, line 1/a	or 1/b; and I	art III, line	12. Provid	de any other	additional information.	See instructions	<u></u>
					• • • • • • • • • • • • • • • • • • • •			•
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Part I, Line 20 (990-EZ) - Other Changes in Net Assets or Fund Balances

<u> </u>	rait i, Line 20 (990-EZ) - Other Changes in Net Assets of Fund Balances					
	Description		Amount			
	UNREALIZED GAIN (LOSS)-FIDELITY INVESTMENT PORTFOLIO	1	71,107			
2	ROUNDING	2	2			
3		3				
4		4				
5		5				
6		6				
7		7				
8		8				
9		9				
10		10				

Pa	nrt I, Line 16 (990-EZ) - Other Expenses		36,306
1	Travel	1	18,057
2	Meals and entertainment	. 2 ¯	
3	Fundraising	. 3 -	
4	Amortization	.4.	0
5	Conferences, conventions, and meetings	5 -	. 1,171
6	Depreciation	. 6	0
7	Depletion	. 7 -	 -
8	Equipment rental and maintenance	. 8 .	
9	Interest	9 _	· · ·
10	Supplies	.10	215
11	Telephone	.11]	<u> </u>
12		12	0 .
13	Awards paid	13	7,857
14		_ 14 _	
15		15	340
16	<u> </u>	_ 16 _	228
17	Bank fees	_ 17 _	414
18		_ 18 _	6,210
19	Training Costs	_ 19 _	750
20	Miscellaneous Expenses	_ 20 _	1,064
21		_ 21 _	
22		_ 22 _	
23		_ 23 _	
24		_ 24 _	
25		_ 25 _	
26		_ 26 _	
27		_ 27 _	
28		28 _	
29		_ 29 _	