DLN: 93493013009280 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 03-01-2018 , and ending 02-28-2019 D Employer identification number B Check if applicable NATIONAL PROPANE GAS ASSOCIATION □ Address change 36-2087363 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1899 L STREET NW NO 350 ☐ Amended return ☐ Application pending (202) 466-7200 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC $\,$ 20036 G Gross receipts \$ 7,980,532 Name and address of principal officer H(a) Is this a group return for STEPHEN T KAMINSKI ☐Yes **☑**No subordinates? 1899 L STREET NW NO 350 H(b) Are all subordinates WASHINGTON, DC 20036 ☐ Yes ☐No ıncluded? 501(c)(3) **✓** 501(c) (6) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW NPGA ORG L Year of formation 1938 M State of legal domicile NJ Summary 1 Briefly describe the organization's mission or most significant activities TO ADVANCE SAFETY AND TO INCREASE THE USE OF PROPANE THROUGH SOUND PUBLIC POLICY Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 144 4 144 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) 6 272 Total unrelated business revenue from Part VIII, column (C), line 12 7a 56,017 **b** Net unrelated business taxable income from Form 990-T, line 34 -13,144 **Current Year Prior Year** 8 Contributions and grants (Part VIII, line 1h) . 44,225 43,139 Ravenua 5,977,029 5,618,159 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 169,019 305,923 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,396,536 1,533,607 7,586,809 7,500,828 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 3,399,494 3,371,141 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 4,315,129 3,613,596 7,714,623 6,984,737 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -127,814 Revenue less expenses Subtract line 18 from line 12 . 516,091 Net Assets or Fund Balances Beginning of Current Year **End of Year** 9,462,537 9,137,867 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 3,680,402 3,017,220 22 Net assets or fund balances Subtract line 21 from line 20 . 5,782,135 6,120,647 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here BRIAN DUNLAP VP FINANCE & CFO Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P01234578 Paid self-employed Firm's name RSM US LLP Firm's EIN ► 42-0714325 Preparer Use Only Firm's address ▶ 1861 INTERNATIONAL DRIVE SUITE 400 Phone no (703) 336-6400 MCLEAN, VA 22102 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)				Page 2
Pa	Statement	of Program Service Acc	complishments		
	Check if Sched	dule O contains a response or	note to any line in this Part III		🗸
1	Briefly describe the o	rganization's mission	·		
MEM FAVO	BERS, NPGA HAS SET 1	THESE STRATEGIC GOALS -ARIBUTION AND INCREASED U	ADVANCE SAFETY THROUGHOUT	IC POLICY TO ACHIEVE THIS MISS THE PROPANE INDUSTRY -ACHIE STRY-WIDE COHESION - THROUG	VE PUBLIC POLICIES THAT
2	Did the organization i	undertake any significant pro	gram services during the year w	hich were not listed on	
	the prior Form 990 or	☐ Yes ☑ No			
3	If "Yes," describe the				
3	services?		gnificant changes in how it condi	acts, any program	□Yes ✓No
	If "Yes," describe the	1es 110			
4	Section 501(c)(3) and		required to report the amount o	largest program services, as meas of grants and allocations to others,	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				,
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
4d	Other program service	es (Describe in Schedule O)			
	(Expenses \$	ıncludıng	grants of \$) (Revenue \$)
4e	Total program serv	ice expenses ▶			

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Par	Checklist of Required Schedules			
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	Yes	No No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	Yes	
	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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$?	5	Yes	
6	If "Yes," complete Schedule C, Part III			
7	If "Yes," complete Schedule D, Part I 2	6		No
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 2 Did the organization maintain collections of works of art, historical treasures, or other similar assets?	7		No No
9	If "Yes," complete Schedule D, Part III	8		No
,	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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No
	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 3	11c		No
	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 "S	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🔁	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
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(see instructions)	17		No
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		No
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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Pa	Checklist of Required Schedules (continued)			
			Yes	No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
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 Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization 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	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36		36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Check if Schedule O contains a response or note to any line in this Part $V\$.

21 0 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1a

1b

Yes

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No

If "Yes," did the organization notify the donor of the value of the goods or services provided?

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d |

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8 9a Did the sponsoring organization make any taxable distributions under section 4966? . . . 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . 9h Section 501(c)(7) organizations. Enter

a Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders . 11a

12a

14b

15

No

No

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b Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 13a

13b which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c

Enter the amount of reserves the organization is required to maintain by the states in 14a

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

20

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	•	onse to i	lines 🗸
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 144			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 144			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? \cdot	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	'
Ь	Other officers or key employees of the organization	15b	Yes	
	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		No
b				
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt	16b		
S e	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
17	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

	1b Sub-Total												
	otal (add lines 1b and 1c)	•					•		1,537,073		0		373,102
2													
												Yes	No
3	Did the organization list any former cline 1a? <i>If "Yes," complete Schedule 3</i>										3		No

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such ındıvıdual . 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?If "Yes," complete Schedule J for such person . . . Section B. Independent Contractors

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

4 Yes 5 Nο Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(B)

Description of services

LEGAL

LOBBYING

(C)

Compensation

Form 990 (2018)

314,030

140,000

(A)

Name and business address VENABLE LLP

compensation from the organization ▶ 2

PO BOX 62727

BALTIMORE, MD 21264 CAPITOL TAX PARTNERS 101 CONSTITUTION AVE NW STE 675 WASHINGTON, DC 20001

Part	Check if Schedule O contains	a respons	se or note to any l	ine in this Part VIII			🗆
		·		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a Federated campaigns	1a		L	revenue		512 - 514
ints ints	b Membership dues	1b	_				
Gra not	c Fundraising events	1c					
چ کے آج	d Related organizations	1d					
<u> </u>	e Government grants (contributions)	1e					
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants,						
ution in	and similar amounts not included above	1f	43,139				
	g Noncash contributions included						
	in lines 1a - 1f \$ h Total. Add lines 1a-1f						
<u>ه</u> د	I Total: Add lines 14-11	· ·	Business	43,139			
j	2a MEMBERSHIP DUES		Business (3,2	30,292 3,230	0,292	
ven	b CONVENTIONS/MEETINGS			1,3	96,791 48:	3,153	913,638
ą.	c PERC DOCKET			900099 4	85,656 48 ¹	5,656	+
.MC€	d ASSESSMENT FEES			900099	48,265 248	3,265	
Ş	e MEETING SPONSORSHIPS				46,625		246,625
ranı			9	900099	10,530 10	0,530	
Program Service Revenue	f All other program service revenue	2	L	.8,159	10,550	,,550	ı
<u>.</u>	gTotal. Add lines 2a-2f	. •		.6,159	_		
	3 Investment income (including divided similar amounts)		erest, and other	207,784	4		207,784
	4 Income from investment of tax-ex						
	5 Royalties		i	1,003,426	5		1,003,426
	(ı) Rea	al	(II) Personal				
	6a Gross rents						
	b Less rental expenses						
	c Rental income or						
	(loss)						
	d Net rental income or (loss) .		· · · •				
	7a Gross amount	ties	(II) Other				
		577,843					
	than inventory						
	b Less cost or other basis and	479,704					
	sales expenses	·					
	C Gain or (loss) d Net gain or (loss)	98,139		98,139	9		98,139
	8a Gross income from fundraising ev	_	<u> </u>				,
ne	(not including \$	of					
Ven	contributions reported on line 1c) See Part IV, line 18						
Other Revenue	b Less direct expenses	ь					
ıer	c Net income or (loss) from fundrai		ts •				
Off	9a Gross income from gaming activit See Part IV, line 19	ies					
		a (
	b Less direct expenses	ь_					
	c Net income or (loss) from gaming10aGross sales of inventory, less	activities	· · · •				
	returns and allowances						
	.	a 					
	b Less cost of goods sold	b	· •				
	Net income or (loss) from sales of Miscellaneous Revenue	Inventor	y · · ► Business Code				
	11aproject management rec		900099	457,780	457,780		
	b ADVERTISING REVENUE		900099	56,01	7	56,017	
	c COUNCIL CONTRIBUTIONS		900099	8,250	8,250		
	d All other revenue			8,134	8,134	1	
	e Total. Add lines 11a-11d		•	530,18	1		
	12 Total revenue. See Instructions	· ·	· · · <u></u>	7,500,828	4,932,060	56,017	2,469,612
							Form 990 (2018)

Section 501(c)(3) and 501(c)(4)	organizations must complete all columr	s All other organizations must complete column (A)

orr	m 990 (2018)				Page 10
	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anizations must com	plete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21		·		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,143,333			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	1,630,076			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	170,310			
9	Other employee benefits	256,385			
10	Payroll taxes	171,037			
11	Fees for services (non-employees)				
ā	a Management				
ı	Legal	219,424			
	c Accounting	33,165			
	il Lobbying	167,932			
	Professional fundraising services See Part IV, line 17				
	Investment management fees	26,080			
	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	488,161			
12	Advertising and promotion	3,000			
13	Office expenses	314,673			
14	Information technology	108,092			
15	Royalties				
	Occupancy	305,354			
17	Travel	336,019			
	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	746,428			
20	Interest	173			-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	49,806			
23	Insurance	80,826			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a NPGA PROJECT MANAGEMENT	426,780			
	b PERSONNEL ADMIN	146,397			
	c PRINTING & DUPLICATION	92,084			
	d BUSINESS ENTERTAINMENT	29,835			
	e All other expenses	39,367			
25	Total functional expenses. Add lines 1 through 24e	6,984,737			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

Page **11**

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70,422

6,120,647

9,137,867

Form **990** (2018)

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5,782,135

9,462,537

Form 990 (2018)

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Liabilities 22

Assets or Fund Balances

Net

Grants payable .

Deferred revenue .

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

			,
1 Cash-non-interest-bearing	1,227,805	1	135,054
2 Savings and temporary cash investments	29,268	2	699,146
3 Pledges and grants receivable, net		3	
4 Accounts receivable, net	184,413	4	218,880
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete		6	

	0	section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations. Part II of Schedule L	s(c)(3)(B), and of section 501(c)(9) structions) Complete		6		
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			10,073	8	
4	9	Prepaid expenses and deferred charges			400,463	9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	709,607			
	b	Less accumulated depreciation	10 b	653,497	82,700	10c	
	11	Investments—publicly traded securities .			7,083,348	11	
	12	Investments—other securities See Part IV, line		12			
	13	Investments—program-related See Part IV, line		13			
	14	Intangible assets			14		

SS	8	Inventories for sale or use			10,073	8	12,607
4	9	Prepaid expenses and deferred charges	400,463	9	450,097		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	709,607			
	b	Less accumulated depreciation	10 b	653,497	82,700	10 c	56,110
	11	Investments—publicly traded securities .	7,083,348	11	7,127,541		
	12	Investments—other securities See Part IV, line		12			
	13	Investments—program-related See Part IV, line	11 .			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11	444,467	15	438,432		
	16	Total assets.Add lines 1 through 15 (must equ	9,462,537	16	9,137,867		
	17	Accounts payable and accrued expenses	408,211	17	304,685		

3a

3b

No

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

Audit Act and OMB Circular A-133?

Additional Data

VOICE OF THE PROPANE INDUSTRY

Software ID: Software Version:

EIN: 36-2087363

Name: NATIONAL PROPANE GAS ASSOCIATION

Form 990 (2018)

Form 990, Part III, Line 4a: GOVERNMENT AFFAIRS - TO ACHIEVE PUBLIC POLICIES THAT FAVOR PRODUCTION. DISTRIBUTION AND INCREASED USE OF PROPANE AND TO SERVE AS THE PRINCIPAL

NPGA SOUTHEASTERN CONVENTION & INTERNATIONAL PROPANE EXPO - PROVIDES A WORLD CLASS VENUE THAT SHOWCASES THE LARGEST ARRAY OF PROPANE RELATED PROVIDERS, PRODUCTS AND SERVICES IT OFFERS THE BEST NETWORKING OPPORTUNITIES TO CONNECT THE INDUSTRY'S LEADING SUPPLIERS, MANUFACTURERS AND SERVICE PROVIDERS. THE EDUCATIONAL PROGRAM AT THE TRADE SHOW OFFERS EDUCATIONAL SESSIONS THAT PROVIDE ESSENTIAL SKILLS AND

Form 990, Part III, Line 4b:

PROVEN STRATEGIES TO TAKE YOUR EMPLOYEES AND PROPANE BUSINESSES TO THE NEXT LEVEL

Form 990, Part III, Line 4c: REGULATORY & TECHNICAL AFFAIRS - TO ENSURE THAT REGULATIONS AND STANDARDS IMPACTING THE PROPANE INDUSTRY ARE REASONABLE, COST-EFFECTIVE AND SAFETY-BASED NPGA ENGAGES WITH THE VARIOUS FEDERAL GOVERNMENT DEPARTMENTS AND AGENCIES MAKING SURE THAT NPGA HAS A VOICE IN THE DEVELOPMENT OF NEWLY PROPOSED OR CHANGES TO EXISTING REGULATIONS AND STANDARDS. ONE OF THE MANY OBJECTIVES OF THE PROPANE INDUSTRY IS TO

DEVELOP AND USE GUIDELINES OR STANDARDS TO HELP MANUFACTURE EQUIPMENT AND TO PROMOTE FIRE PREVENTION AND SAFE OPERATION WITHIN THE PROPANE

INDUSTRY

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

	formulated							Organization	Organizacions	organization and	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
CHRISTOPHER EARHART NPGA CHAIRMAN OF THE BOARD	15 00 2 00	×		×				0	0	0	
RANDY THOMPSON NPGA CHAIRMAN ELECT	10 00	×		×				0	0	0	
DENIS GAGNE NPGA VICE CHAIRMAN	5 00	×		х				0	0	0	
ROBERT BARRY NPGA TREASURER	5 00	×		x				0	0	0	
AARON REECE PROPANE SUPPLIER SECTION	1 00	×						0	0	0	
ALLEGRA PACHECO	1 00										

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AARON REECE
PROPANE SUPPLIER SECTION
ALLEGRA PACHECO
NEW MEXICO DIRECTOR

DISTRICT 8 DIRECTOR, NC DIRECTOR

AMY DEAN

ANDREW PEYTON

ANDY LAMBERT

ANDY WISE

DIRECTOR AT LARGE

DELAWARE DIRECTOR

ALABAMA DIRECTOR

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the compensation from related and a director/trustee) any hours organization organizations from the

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
BILL BYRNE ADVISORY DIRECTOR AT LARGE	1 00	×					0	0	0
BILL COLLINS DIRECTOR AT LARGE	1 00	х					0	0	0
BILL JELLISON ADVISORY DIRECTOR AT LARGE	1 00	Х					0	0	0
BILLY COX LOUISIANA DIR , AUDIT COMM CHAIR	1 00	×					0	0	0
BILLY PRINCE ARKANSAS DIRECTOR	1 00	×					0	0	0

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LOUISIANA DIR , AUDIT COMM CHAIR
BILLY PRINCE
ARKANSAS DIRECTOR
BOB PAUL

MANUFACTURERS SECTION DIRECTOR

TENNESSEE DIR, MEMBER SERV CHAIR

MANUFACTURERS SECTION DIRECTOR

PROPANE SUPPLIER SECTION

......

BOB WALLACE

BRADLEY BOX

BRENT BATY

BRUCE LEONARD

MINNESOTA DIRECTOR

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

	any hours and a director/trustee)							organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	ee voldwe Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
BRUCE MONTROY DISTRIBUTORS SECTION, CHAIR	1 00	×						0	0	0	
CARL HUGHES ADVISORY DIRECTOR AT LARGE	1 00	×						0	0	0	
CARLTON REVERE DIRECTOR AT LARGE	1 00	х						0	0	0	
CHAD GRAY DISTRICT 5 DIRECTOR	1 00	x						0	0	0	
CHARLIE ORY	1 00										

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CHARLIE ORY ADVISORY DIRECTOR AT LARGE

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CHRISTOPHER CAFARELLA

......

DIRECTOR AT LARGE

DIRECTOR AT LARGE

MONTANA DIRECTOR

GOVERNMENT AFFAIRS CHAIR

PROPANE SUPPLIER SECTION

CYNTHIA BELMONT

D D ALEXANDER

CHUCK STRAWN

COLIN ROGERS

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the compensation from related and a director/trustee) any hours organization organizations from the

and Independent Contractors

WEST VIRGINIA DIRECTOR

RHODE ISLAND DIRECTOR

PROPANEPAC COMMITTEE CHAIR

......

MANUFACTURERS SECTION DIRECTOR

DAVID BIGGS

DAVID DARRAH

DAVID DAY

DAVID LONG

MICHIGAN DIRECTOR

DAVID MCKINNON

IDAHO DIRECTOR

	6,						'	(11) 2(1000	(14) 2/4 000		
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
DAN RICHARDSON GEORGIA DIRECTOR	1 00	×						0	0	0	
DANIEL OVERPECK INDIANA DIRECTOR	1 00	×						0	0	0	
DARYL MCCLENDON ADVISORY DIRECTOR AT LARGE	1 00	×						0	0	0	
DAVID BARDETT	1 00										

INDIANA DIRECTOR							
DARYL MCCLENDON	1 00	×			0	0	
ADVISORY DIRECTOR AT LARGE		^			3	Ŭ	
DAVID BARRETT ARIZONA DIR , CONVENTIONS CHAIRMAN	1 00	x			0	0	
DAVID BERTELSEN	1 00						

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DOUG AUXIER ADVISORY DIRECTOR AT LARGE	1 00	х						0	0	0
ERICH WOLF MANUFACTURERS SECTION DIRECTOR	1 00	х						0	0	0
EUGENE BISSELL ADVISORY DIRECTOR AT LARGE	1 00	х						0	0	0
FRANK TAYLOR	1 00									

EUGENE BISSELL	1 00	_					
ADVISORY DIRECTOR AT LARGE	1 00	`				9	
FRANK TAYLOR		_				0	
DISTRICT 9 DIRECTOR		^					
FRANK THOMPSON	1 00						
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ADVISORY DIRECTOR AT LARGE					
FRANK TAYLOR	1 00	×			
DISTRICT 9 DIRECTOR		, ,			
FRANK THOMPSON	1 00	×			
DIRECTOR AT LARGE		, n			

and Independent Contractors

GARY FRANCE

GARY PAPAY

GERRY MISEL

ADVISORY DIRECTOR AT LARGE

SERVICES SECTION DIRECTOR

ADVISORY DIRECTOR AT LARGE

ADVISORY DIRECTOR AT LARGE

GEORGE KOLOROUTIS

DIRECTOR AT LARGE

GLENN SAUNDERS

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation

and Independent Contractors

J NUTIE DOWDLE

JAMES SENTY

JEFFREY GRESHAM

JEFFREY STEWART

JENNIFER BAXTER

DIRECTOR AT LARGE

DIRECTOR AT LARGE

KENTUCKY DIRECTOR

JAMES BERTELSMEYER

ADVISORY DIRECTOR AT LARGE

ADVISORY DIRECTOR AT LARGE

ADVISORY DIRECTOR AT LARGE

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	any hours	and	a dır	ecto	r/tr	ustee))	organization	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
GREG BLAZINA DIRECTOR AT LARGE	1 00	×						0	0	0
GREG MCCAMUS CANADA DIRECTOR	1 00	х						0	0	0
HAROLD POLAND	1 00									

DIRECTOR AT LARGE		^				3	
GREG MCCAMUS	1 00	×			0	C	
CANADA DIRECTOR		,,				9	
HAROLD POLAND	1 00	×			0	C	
DIRECTOR AT LARGE		,			9)	
J CHARLES SAWYER	1 00	×			0	C	
ADVISORY DIRECTOR AT LARGE		"			Ĭ	, and the second	

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

	formulated	ā	a uii	ecti	<i>)</i> 1/ (1	usiee,	'	(W 2/1000	(W 2/1000	overnment and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JEREMY YOUNG MAINE DIRECTOR	1 00	×						0	0	0	
JERRY BRICK ADVISORY DIRECTOR AT LARGE	1 00	Х						0	0	0	
JIM REDDINGTON DISTRICT 1 DIRECTOR	1 00	х						0	0	0	
JIM BISHOP TEXAS DIRECTOR	1 00	×						0	0	0	
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JIM HAM JR SERVICES SECTION, CHAIR

JIM ZUCK

TS&S CHAIRMAN

JOHN BROOKS III

JOHN PANKRATZ

KANSAS DIRECTOR

JOSEPH ARMENTANO

DIRECTOR AT LARGE

MISSOURI DIRECTOR

ADVISORY DIRECTOR AT LARGE

JOE CORDILL

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation

and Independent Contractors

UTAH DIRECTOR

KEITH MCMAHAN

KEN KRAFT

KEN MUELLER

KIM COLBURN

KIM GODLEWSKI

ADVISORY DIRECTOR AT LARGE

CETP CERTIFICATION CHAIRMAN

PROPANE SUPPLY & LOG, VICE CHAIR

DISTRIBUTOR SECTION DIRECTOR

......

NORTH DAKOTA DIRECTOR

	any hours	and	a dır	ecto	r/tr	ustee)	1	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JOSEPH BUSCHUR OHIO DIRECTOR	1 00 2 00	×						0	0	0	
JOSEPH PORCO	1 00	х						0	0	0	
NEW YORK DIRECTOR JUDY TARANOVICH	1 00										
		l 🗤	ı	l	1			ا		۱ .	

JOSEPH PORCO	1 00	x			0	0	
NEW YORK DIRECTOR							
JUDY TARANOVICH	1 00	V				0	
VERMONT DIRECTOR		^			١	0	
KARA TUCKER	1 00						
PENNSYLVANIA DIRECTOR		×			٥	0	

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JUDY TARANOVICH	1 00	l 🗸					0	0	
VERMONT DIRECTOR		^						0	
KARA TUCKER	1 00								
PENNSYLVANIA DIRECTOR		×					ľ	U	
KEITH HANCHETT	1 00								

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

and Independent Contractors

ADVISORY DIRECTOR AT LARGE

MARK DENTON

MARK MILLER

......... DIRECTOR

MART WINDHAM

MICHAEL GORHAM

MICHAEL HIEFNER

DISTRICT 7 DIRECTOR

MISSISSIPPI DIRECTOR

ADVISORY DIRECTOR AT LARGE

MANUFACTURERS SECTION DIRECTOR

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	4117 110415					ascee,	′	arganization	digametra and		
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
LARRY OSGOOD SERVICES SECTION DIRECTOR	1 00	×						0	0	0	
LESLIE WOODWARD MANUFACTURERS SECT DIR , VICE CHAIR	1 00	×						0	0	0	
LISA GERWITZ PROPANE SUPPLIER SECTION	1 00	×						0	0	0	
LANN HADDIN	1 00										

LISA GERWITZ	1 00	×			0	0	
PROPANE SUPPLIER SECTION		_ ^				0	
LYNN HARDIN	1 00						
		l x			0	0	
MANUFACTURERS SECTION DIR , CHAIR	2 00						
MALCOLM BARRETT	1 00						

		l x					l n	ا ۱	1
PROPANE SUPPLIER SECTION								Ŭ	
LYNN HARDIN	1 00								
		X					0	0	ı
MANUFACTURERS SECTION DIR , CHAIR	2 00								
MALCOLM BARRETT	1 00								
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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

	any hours	and	a dır	ecto	r/trرد	rustee))	organization (W- 2/1099-	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	MISC)	(W- 2/1099- MISC)	organization and related organizations	
MICHAEL HOPSICKER DISTRIBUTOR SECTION DIRECTOR	1 00	×						0	0	0	
MICHAEL SHEEHAN DISTRICT 4 DIRECTOR	1 00	×						0	0	0	
MICHELLE BIMSON-MAGGI DIRECTOR AT LARGE, GOV AFFAIRS	1 00	x						0	0	0	
MIKE ERIKSEN NEVADA DIRECTOR	1 00							0	0	0	
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THENELLE BINSON MAGGI
DIRECTOR AT LARGE, GOV AFFAIRS
MIKE ERIKSEN
NEVADA DIRECTOR
MIKE PITTS

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MANUFACTURERS SECTION DIRECTOR

DISTRIBUTOR SECTION DIRECTOR

MANUFACTURERS SECTION DIRECTOR

MIKE RUTHERFORD

MILT SWENSON

NASH MCMAHAN

NATALIE PEAL

NEAL KANEL

MARYLAND DIRECTOR

NEBRASKA DIRECTOR

SERVICES SECTION DIRECTOR

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

	c i i i i	""	u un	CCCC		usice,		(14 2 (4 000	(14/ 2/4000	overnment and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
PAT WALKER DIRECTOR AT LARGE	1 00	×						0	0	0	
PAUL LANEY OKLAHOMA DIRECTOR	1 00	х						0	0	0	
PETER RYAN VIRGINIA DIRECTOR	1 00	×						0	0	0	
RAMON GONZALEZ INTERNATIONAL SECTION CHAIRMAN	1 00	×						0	0	0	
RANDALL DOYLE DISTRICT 7 DIRECTOR	1 00	×						0	0	0	
RANDY BRADFORD	1 00										

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ALASKA DIRECTOR

RANDY SAMS

RANDY RUTHERFORD

RAYMOND MURRAY III

RICARDO SCHONDUBE

MEXICO DIRECTOR

ADVISORY DIRECTOR AT LARGE

FLORIDA DIR, INDIV MEMBER DIR

ADVISORY DIR AT LARGE, DIST SERVICE

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer compensation from the from related from the any hours and a director/trustee)

	any hours	1	a dır	ecto	or/tr	ustee)	organization (W- 2/1099-	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	(W-2/1099) W-2/1099 W		(W- 2/1099- MISC)	organization and related organizations				
RICHARD ROWAN CONNECTICUT DIRECTOR	1 00	×						0	0	0	
RICHARD TARANTIN DIRECTOR AT LARGE	1 00	х						0	0	0	
RICK LADUE MANUFACTURERS SECTION DIRECTOR	1 00	×						0	0	0	
ROB FREEMAN DIRECTOR AT LARGE	1 00	×						0	0	0	
ROBERT BLACKWELL COLORADO DIRECTOR	1 00	×						0	0	0	

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ROBERT BLACKWELL
COLORADO DIRECTOR
ROBERT MATTOCKS
ADVISORY DIRECTOR AT LARGE

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ROBERT MAUCH

ROBIN PARSONS

ROGER BOEHLKE

ROLAND PENTA

WISCONSIN DIRECTOR

ADVISORY DIRECTOR AT LARGE

ADVISORY DIRECTOR AT LARGE

MANUFACTURERS SECTION DIRECTOR

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

and Independent Contractors

CALIFORNIA DIRECTOR

DIRECTOR AT LARGE

......

PROPANE SUPPLY & LOGISTICS, CHAIR

MASSACHUSETTS DIRECTOR

SHAWN COADY

STEPHAN CHASE

STEPHEN KOSSUTH

STEPHEN MURPHY

STEVE BLAKEMAN

DIRECTOR AT LARGE

WYOMING DIRECTOR

	1 4117 110415							(1)	(in alterior	l lioni the
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
RYAN BULLER OREGON STATE DIRECTOR	1 00	x						0	0	0
RYAN JACKSON NEW HAMPSHIRE DIRECTOR	1 00	×						0	0	0
SAMUEL MCTIER ADVISORY DIRECTOR AT LARGE	1 00	×						0	0	0
SCOTT PARSONS	1 00	x						0	0	0

0

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NEW HAMPSHIRE DIRECTOR						
SAMUEL MCTIER ADVISORY DIRECTOR AT LARGE	1 00				0	
SCOTT PARSONS SOUTH DAKOTA DIRECTOR	1 00	×			0	
SHANNON MCWHORTER	1 00					

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

	any nours	and	a dir	ecto	r/tr	ustee)	'	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
STEVE GENTRY MANUFACTURERS SECTION DIRECTOR	1 00	×						0	0	0	
STEVE MILLER WASHINGTON DIRECTOR	1 00	×						0	0	0	
STUART WEIDIE ADVISORY DIRECTOR AT LARGE	1 00	×						0	0	0	
THOMAS JAENICKE DISTRICT 6 DIRECTOR	1 00	×						0	0	0	

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ADVISORY DIRECTOR AT LARGE
THOMAS JAENICKE
DISTRICT 6 DIRECTOR
THOMAS MANSON
DISTRICT 10 DIRECTOR

THOMAS TARANTIN

TIM SCHWEPPE

TOD CORRIN

TODD PELLETT

TOM CLARK

IOWA DIRECTOR

DISTRICT 3 DIRECTOR

NEW JERSEY DIRECTOR

MANUFACTURERS SECTION DIRECTOR

MANUFACTURERS SECTION DIRECTOR

......

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	1,				,	/		(1)	(11)	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
TOMMY MANION DIRECTOR AT LARGE	1 00	x						0	0	0
TONYA CROW ILLINOIS DIRECTOR	1 00	×						0	0	0
WARREN PATTERSON DIRECTOR AT LARGE	1 00	×						0	0	0
WILLIAM PLATZ DISTRICT 2 DIRECTOR	1 00	×						0	0	0
ZOE WILLIAMS	1 00									

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83,190

48,316

26,962

28,054

61,996

418,727

148,049

187,339

202,696

150,478

....... SR VP PUBLIC & GOVERNMENTAL AFFAIRS

HAWAII DIRECTOR

RICHARD ROLDAN

PRESIDENT & CEO

PHILIP SQUAIR

BRIAN DUNLAP

JEFFREY PETRASH

VP GENERAL COUNSEL

MICHAEL CALDARERA

VP FINANCE & ADMIN & CFO

VP REGULATORY & TECHNICAL SERVICES

and Independent Contractors (A) Name and Title

DIRECTOR OF SAFETY AND CERTIFICATION

VICE PRESIDENT, STATE AFFAIRS

SENIOR TECHNICAL ADVISOR

FRIC KUSTER

LESLEY GARLAND

BRUCE SWIECICK

	any hours for related organization below dotte line)
	40
••••	
	40

(B)

Average hours per

week (list

ΩΩ 00

40 00

.

Individual

Institutio

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

(C)

Position (do not check more

than one box, unless person is both an officer and a director/trustee)

compensation from the organization (W- 2/1099-MISC) 146,877 143,412

139,495

(D)

Reportable

compensation from related organizations (W- 2/1099-MISC)

(E)

Reportable

(F)

Estimated

amount of other

compensation

from the

organization and

related

organizations

29,291

45,856

49,437

SCHEDULE C

Political Campaign and Lobbying Activities

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

OMB No 1545-0047

DLN: 93493013009280

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

• 8 • 8 f the • 8 • 8 f the Prox	Section 501(c) (other than section 5 Section 527 organizations Complet e organization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form have filed Form 5768 (election under have NOT filed Form 5768 (election un Form 990, Part IV, Line 5 (Proxy Tas), then	ts I-A and C below 990-EZ, Part VI, III section 501(h)) Counder section 501(h	ne 47 (Lobbyin omplete Part II- i)) Complete P nstructions) o	ng Activiti A Do not art II-B Do or Form 99	ies), then complete Par o not complet	e Part II-A , Iine 35 c	
Par	t I-A Complete if the organ	nization is exempt under secti	on 501(c) or is	a section 52	27 organ	nization.		
1 2 3	Provide a description of the organ "political campaign activities") Political campaign activity expend Volunteer hours for political camp		mpaign activities ir	n Part IV (see II	nstructions	s for definition	n of	
		nization is exempt under section	on 501(c)(3).					_
1 2 3 4a b	Enter the amount of any excise ta	x incurred by the organization under s x incurred by organization managers of ion 4955 tax, did it file Form 4720 for	under section 4955		>	\$ \$ Ye		No No
		nization is exempt under section	on 501(c), exce	ept section 5	501(c)(3	3).		
1 2 3 4 5	Enter the amount of the filing organization activities Total exempt function expenditure Did the filing organization file For Enter the names, addresses and e	m 1120-POL for this year?	organizations for se on Form 1120-POL, f all section 527 pc	ection 527 exer line 17b olitical organiza	tions to w			
	of political contributions received	that were promptly and directly delive	red to a separate p	olitical organiza				
	filing org funds If		(d) Amount filing orgar funds If no -0-	nization's one, enter	contribut and pr directly separa organiza	unt of politions received and the comptly and delivered the contract of the co	ved d to a al	
1								
2								
3								
1								
5								
5								
or P	aperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat	No 50084S	Schedule (C (Form 990 o	990-EZ) 2	2018

Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in)

Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount

2a Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2018

(b)

Amount

(a) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying Yes

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Were substantially all (90% or more) dues received nondeductible by members?

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

No

Yes

1

2

1

2a

2b

2c 3

4 5

Schedule C (Form 990 or 990EZ) 2018

No

No

No

3,230,292

807,111

-67.337

739.774

631.700

108,074

Media advertisements? Mailings to members, legislators, or the public?

Volunteers?

Other activities?

Total Add lines 1c through 1i

501(c)(6).

activity

1

b

2a

1

2

C Total

Part IV

3

Part III-A

Part III-B

Current year

Carryover from last year

expenditure next year?

Return Reference

answered "Yes." Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

Supplemental Information

expenses for which the section 527(f) tax was paid).

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?

If "Yes," enter the amount of any tax incurred under section 4912

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

DLN: 93493013009280OMB No 1545-0047

2018

Open to Public Inspection

	i me of the organization TIONAL PROPANE GAS ASSOCIATION			Emp	oloyer identifica	ition	number
				36-2	2087363		
Pa	art I Organizations Maintaining Donor Ad			r Acc	ounts.		
	Complete if the organization answered "				41.55		
	Tabal assessing as and affirmation	(a) Donor advise	ea runas		(b)Funds and o	tner	accounts
	Total number at end of year						
	Aggregate value of contributions to (during year)						
	Aggregate value of grants from (during year)						
	Aggregate value at end of year						
5	Did the organization inform all donors and donor adv organization's property, subject to the organization's		s held in donor ad	vised 1	funds are the		Yes 🗌 No
•	Did the organization inform all grantees, donors, and charitable purposes and not for the benefit of the dor private benefit?						Yes 🗌 No
Pa	rt II Conservation Easements. Complete if	the organization answere	ed "Yes" on Form	า 990	, Part IV, line		100 = 110
	Purpose(s) of conservation easements held by the or				,		
	Preservation of land for public use (e g , recreat	cion or education)	Preservation of an	histor	ically important l	and ،	area
	Protection of natural habitat		Preservation of a c				
			reservation of a c	erune	a mistoric structu	16	
	☐ Preservation of open space						
2	Complete lines 2a through 2d if the organization held easement on the last day of the tax year	a qualified conservation cont	tribution in the for	m of a	conservation Held at the E		f the Veer
а	Total number of conservation easements		I	2a [neid at the t	:na c	tne fear
b	Total acreage restricted by conservation easements		-	2b			
c	Number of conservation easements on a certified hist	oric structure included in (a)	-	2c			
d	Number of conservation easements included in (c) ac	` '	on a historic	2d			
u	structure listed in the National Register	quired after 7/25/00, and not	. on a mistoric	Zu			
3	Number of conservation easements modified, transfetax year ▶	rred, released, extinguished,	or terminated by t	the org	ganızatıon durıng	the	
ļ	Number of states where property subject to conserve	ition easement is located >			_		
5	Does the organization have a written policy regarding and enforcement of the conservation easements it has		pection, handling o	of viola	ations,	es	□ No
,	Staff and volunteer hours devoted to monitoring, ins	pecting, handling of violations	, and enforcing co	nserva	ation easements	durır	ng the year
,	Amount of expenses incurred in monitoring, inspectin	ig, handling of violations, and	enforcing conserv	/ation	easements durir	ig the	e year
ı	Does each conservation easement reported on line 2	(d) above satisfy the requiren	nents of section 13	70(h)(4)(B)(ı)		
	and section $170(h)(4)(B)(11)$?	(a) above satisfy the requirem	memes or section 17	• • (11)(es	□ No
)	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easem	he footnote to the organization	,		atement, and		
aı	rt III Organizations Maintaining Collection			er Sii	milar Assets.		
	Complete if the organization answered "						
.a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held to provide, in Part XIII, the text of the footnote to its fir	or public exhibition, educatio	n, or research in fi				
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for p following amounts relating to these items						
((i) Revenue included on Form 990, Part VIII, line 1				▶ \$		
(ii)Assets included in Form 990, Part X				▶ \$		
2	If the organization received or held works of art, hist following amounts required to be reported under SFA			ncial g	' 		
а	Revenue included on Form 990, Part VIII, line 1	,			▶ \$		

b Assets included in Form 990, Part X

Par	t III	Organizations Maintaining Col	lections of Art, H	istori	cal T	reas	ures, o	r Other	Similar A	ssets (d	ontini	ued)	
3		the organization's acquisition, accession (check all that apply)		check									
а		Public exhibition		d		Loar	n or exch	ange prog	rams				
b		Scholarly research		е		Othe	er						
С		Preservation for future generations											
4	Provid Part	de a description of the organization's col KIII	lections and explain h	ow the	ey furtl	ner th	ne organiz	zation's ex	empt purpo	se in			
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							ılar	☐ Ye	s	□ N	0
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		n 990	, Part	IV, I	line 9, o	r reporte	d an amou				
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermedia	ary for	contri	butioi	ns or othe	er assets i	not	☐ Ye	s	□ N	о
Ь	If "Ye	es," explain the arrangement in Part XIII	and complete the foll	owina	table				Α	mount			_
c		ning balance	=	9				1c					_
d	-	ions during the year						1d					_
е		butions during the year						1e					_
f		g balance						1f					_
2a		ne organization include an amount on Fo	rm 990, Part X, line 2	1, for	escrow	or c	ustodial a	ccount lia	ıbılıty?	☐ Ye	s	□ N	– o
b	If "Ye	s," explain the arrangement in Part XIII	Check here if the ex	planati	on has	beer	n provide	d in Part)	(III				
Pa	rt V	Endowment Funds. Complete If	the organization ai	nswer	ed "Y	es" o	n Form	990, Par	t IV, line 1	.0.			
			(a)Current year	(b) P	rıor yea	r	(c) Two y	ears back	(d)Three yea	ars back	(e) Fo	ır year	s back_
1 a	Beginn	ing of year balance	2,728,551		2,636	5,172		2,535,056	2,	472,171		2,2	281,326
b	Contrib	outions	41,077		92	2,379		101,116		62,885		:	190,845
c	Net inv	estment earnings, gains, and losses											
d	Grants	or scholarships											.
е		expenditures for facilities ograms											
f	Admını	strative expenses											
g	End of	year balance	2,769,628		2,728	3,551		2,636,172	2,	535,056		2,4	172,171
2		de the estimated percentage of the curre	ent year end balance (line 1	g, colu	mn (a	a)) held a	s					
а		d designated or quasi-endowment											
b		anent endowment ► 100 000 %											
c		orarily restricted endowment > ercentages on lines 2a, 2b, and 2c shou	ld ogual 100%										
3a		nere endowment funds not in the posses	•	on that	t are h	eld ar	nd admin	istered foi	r the				
		nization by										Yes	No
	(i) ur	nrelated organizations								3a	a(i)		No
		elated organizations								3 a	(ii)	Yes	
b		es" on 3a(II), are the related organization	•			? .				_ 3	3b	Yes	
4		tibe in Part XIII the intended uses of the		ment f	funds								
Pa	rt VI	Land, Buildings, and Equipmen		~ 000	Dort	T\/	lino 11a	Coo For	·m 000 Da	rt V lun	0.10		
	Descri	Complete if the organization answ ption of property (a) Cost or oth (investme	ner basis (b) Cost o						epreciation		d) Boo		
1a	Land												
		gs											
		old improvements			3:	10,532	2		285,769				24,763
		nent				,			,				-,
	Other				30	99,075	5		367,728				31,347
		ines 1a through 1e (Column (d) must e	aual Form 990. Part X	, colur					>				56,110
	/ .uu	14 1 Jugii 10 (Columni (u) must e	, , rait A	, 20141	()	,	(-//		-				55,110

	Investments—Other Securities. Complete if the or				
	See Form 990, Part X, line 12. (a) Description of security or category		(b)		(c) Method of valuation
	(including name of security)		Book value	Cos	t or end-of-year market value
	derivatives				
2) Closely-h 3) Other	neld equity interests				
۹)					
В)					
C)					
D)					
E)					
ř)					
G)					
H)					
otal. (Column art VIII	n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related.	Þ			
	Complete if the organization answered 'Yes' on Form (a) Description of investment		rt IV, lın k value	e 11c. See Fo	orm 990, Part X, line 13.
	(a) Description of investment	(0) 600	ok value	Cos	t or end-of-year market value
1)					
2)			T		
3)					
4)					
5)					
6)					
7)					
- /					
(8)					
9)	n (b) must equal Form 990, Part X, col (B) line 13)				
8) 9) Fotal. (Column	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) otal. (Column			990, Par	t IV, line 11d	See Form 990, Part X, line 15 (b) Book value
8) 9) otal. (Column Part IX	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) otal. (Column Part IX 1) 2)	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) Part IX 1) 2)	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) otal. (Column Part IX 1) 2) 3)	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) otal. (Column Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) otal. (Column Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) otal. (Column Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) Part IX 1) 2) 33) 4) 5) 7)	Other Assets. Complete if the organization answered 'Yes		990, Par	t IV, line 11d	
8) 9) otal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered 'Yes' (a) Description		990, Par	t IV, line 11d	(b) Book value
9) otal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) otal. (Column part IX 1)	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15)	on Form			(b) Book value
8) 9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) Fotal. (Column Part X	Other Assets. Complete if the organization answered 'Yes' (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered 'Yes' See Form 990, Part X, line 25.	on Form	s' on For	m 990, Part :	(b) Book value
8) 9) otal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) otal. (Column Part X	Other Assets. Complete if the organization answered 'Yes' (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered 'Yes'	on Form	s' on For		(b) Book value
potal. (Column Part IX 1) 2) 3) 4) 5) otal. (Column Part X . 1) Federal in EFERRED R	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes ENT	on Form	s' on For	m 990, Part : ok value	(b) Book value
potal. (Column Part IX 1) 2) 3) 4) 5) otal. (Column Part X . 1) Federal In EFERRED RI EFERRED CI	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes	on Form	s' on For	m 990, Part :	(b) Book value
potal. (Column Part IX 1) 2) 3) 4) 5) otal. (Column 7) otal. (Column Part X 1) Federal In EFERRED RI EFERRED COLUMN APITAL LEAS	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes ENT OMPENSATION	on Form	s' on For	m 990, Part : ok value 61,826 417,540	(b) Book value
9) otal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) fotal. (Column Part X . 1) Federal in EFERRED R EFERRED C APITAL LEA: 4)	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes ENT OMPENSATION	on Form	s' on For	m 990, Part : ok value 61,826 417,540	(b) Book value
potal. (Column Part IX 1) 2) 33) 4) 5) 6) 7) 8) 9) fotal. (Column Part X . 1) Federal in EFERRED Ri EFERRED Ci APITAL LEA: 4)	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes ENT OMPENSATION	on Form	s' on For	m 990, Part : ok value 61,826 417,540	(b) Book value
potal. (Column Part IX 1) 2) 33) 4) 55) 7) otal. (Column Part X . 1) Federal in EFERRED R EFERRED C APITAL LEA: 4) 5)	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes ENT OMPENSATION	on Form	s' on For	m 990, Part : ok value 61,826 417,540	(b) Book value
Part IX 1) 2) 3) 4) 5) 6) 7) 8 9) Fotal. (Column Part X 1) Federal III DEFERRED RI DEFERRED CO CAPITAL LEAS 4) 5) 6) 7)	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes ENT OMPENSATION	on Form	s' on For	m 990, Part : ok value 61,826 417,540	(b) Book value
potal. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 6) 7) 8) 9) Fotal. (Column Part X 1) 1) Federal In DEFERRED RI DEFERRED RI DEFERRED CO CAPITAL LEA: 4) 5) 6)	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes ENT OMPENSATION	on Form	s' on For	m 990, Part : ok value 61,826 417,540	(b) Book value
8) 9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal in DEFERRED RI DEFERRED CO CAPITAL LEA: 4) 5) 6) 7) 8) 9)	Other Assets. Complete if the organization answered 'Yes' (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability income taxes ENT OMPENSATION	on Form	s' on For	m 990, Part : ok value 61,826 417,540	(b) Book value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements

Page 4

7,435,926

157,015

26,080

6.984.737

Schedule D (Form 990) 2018

6,958,657

Schedule D (Form 990) 2018

Other (Describe in Part XIII)

Add lines 2a through 2d

Supplemental Information

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Part XI

1

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

2c c d 2d 176.988 -38,822 e 2e 3

3 7,474,748 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a 26,080

4b b Add lines **4a** and **4b** 26,080 4c c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 5

7,500,828 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 7,115,672

Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . . 2a 2b

2 2c c 2d

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

4a

4b

Explanation

157,015

26.080

2e

3

4c

5

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 36-2087363

Name: NATIONAL PROPANE GAS ASSOCIATION

Supplemental Information

Return Reference

Explanation

MEMORIAL ENDOWMENT THE MEMORIAL ENDOWMENT WAS ESTABLISHED TO PERIODICALLY RECOGNIZE A MEM
BER OF NPGA WHO HAS MADE A SIGNIFICANT CONTRIBUTION IN THE AREA OF PUBLIC AFFAIRS THAT BEN
EFITS THE PROPANE GAS INDUSTRY AN AWARD IS PRESENTED IN THE NAME OF WILLIAM C HILL TO TH
E RECOGNIZED MEMBER A CONTRIBUTION IS MADE TO A SCIENTIFIC RESEARCH OR EDUCATIONAL INSTIT
UTION DESIGNATED BY THE AWARD WINNER SCHOLARSHIP ENDOWMENT THE SCHOLARSHIP ENDOWMENT
WAS
ESTABLISHED TO PROMOTE FUNDING OF ENDOWMENTS, THE INCOME FROM WHICH WOULD BE USED TO
GRAN
T SCHOLARSHIPS FOR HIGHER EDUCATION TO CHILDREN OF EMPLOYEES OF COMPANIES ENGAGED IN A PRO

PANE OR RELATED BUSINESS THAT ARE MEMBERS OF THE NPGA

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	THE ASSOCIATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(6) OF T HE INTERNAL REVENUE CODE (IRC), UNLESS IT HAS INCOME FROM UNRELATED BUSINESS ACTIVITIES I NCOME, WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES NPGA DID NOT HAVE ANY NET UNRELATED BUSINESS INCOME FOR THE YEAR ENDED FEBRUARY 28, 2019 MANAGEMENT EVALUATED NPGA'S TAX POSITIONS AND CONCLUDED THAT NPGA HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS

Supplemental Imormation	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	NPG FOUNDATION REVENUE INCLUDED IN CONSOLIDATING STATEMENTS 171,757 DEFERRED RENT ADJUSTM ENT 38,231 ELIMINATIONS IN CONSOLIDATING STATEMENTS -31,000 RECLASS OF CONT AMOUNT INCL

UDED IN REVENUE OF FS -2,000

Supplemental Information

Supplemental Information Return Reference Explanation PART XII, LINE 2D - OTHER NPG FOUNDATION EXPENSES INCLUDED IN CONSOLIDATING STATEMENTS 190,015 ELIMINATIONS IN CONS I ADJUSTMENTS OLIDATING STATEMENTS -31,000 RECLASS OF CONT AMOUNT INCLUDED IN REVENUE OF FS -2,000

efil	le GRAPHIC p	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19301	3009	280	
Schedule J (Form 990)		C	ompensat	ion Information	10	1B No	1545-0	0047	
		For certain Offic		Frustees, Key Employees, and Hig	hest	-			
		Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					2018		
D	▶ Attach to Form 990.					Open to Public			
•	tment of the Treasury al Revenue Service	Go to www.ns.qo	<i>04/1 01111990</i> 101	mistructions and the latest mion		Insp	ectio	n	
	me of the organiz TONAL PROPANE GA				Employer identificat	ion nu	ımber		
					36-2087363				
Pa	rt I Questi	ons Regarding Compensa	ation						
1 a				f the following to or for a person liste by relevant information regarding the			Yes	No_	
	☐ First-clas	s or charter travel		Housing allowance or residence for	personal use				
		r companions		Payments for business use of perso	•				
	Tax idem	nıfıcatıon and gross-up paymen	ts 🔲	Health or social club dues or initiati	on fees				
	Discretion	nary spending account		Personal services (e g , maid, chau	ffeur, chef)				
b		exes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding payn	nent or reimbursement	1b			
2				or allowing expenses incurred by all	- 1-3	2			
	airectors, truste	ees, officers, including the CEO/	Executive Directo	r, regarding the items checked in line	e la'				
3				ed to establish the compensation of t not check any boxes for methods	he				
	_	•		CEO/Executive Director, but explain	ın Part III				
	✓ Compens	ation committee		Written employment contract					
		lent compensation consultant	✓	Compensation survey or study					
	☐ Form 990	of other organizations	\checkmark	Approval by the board or compensa	ation committee				
4	During the year related organiza		990, Part VII, Se	ection A, line 1a, with respect to the f	iling organization or a				
а	Receive a sever	rance payment or change-of-cor	ntrol payment?			4a		No	
b	Participate in, c	or receive payment from, a supp	lemental nonqual	lified retirement plan?		4b	Yes		
С		or receive payment from, an equ		_		4c		No	
	If "Yes" to any	of lines 4a-c, list the persons an	id provide the app	olicable amounts for each item in Par	t III				
	Only 501(c)(3	3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.					
5		ed on Form 990, Part VII, Section contingent on the revenues of		the organization pay or accrue any					
а	The organizatio	n?				5a			
b	Any related org					5b			
_	•	5a or 5b, describe in Part III							
6		ed on Form 990, Part VII, Sections on the net earnings o		the organization pay or accrue any					
a L	The organizatio					6a			
Ь	Any related org	anization? e 6a or 6b, describe in Part III				6b			
7	•	•	on A, line 1a, did	the organization provide any nonfixe	d				
		described in lines 5 and 6? If "Ye				7			
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8			
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also folk	ow the rebuttable	presumption procedure described in	Regulations section	9			
For F	Panerwork Red	uction Act Notice, see the In	structions for Fo	orm 990. Cat No	50053T Schedule J	(Form	990)	2018	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and other deferred other deferred benefits (B) Total of columns (F) Compensation other deferred benefits (B) (I) Total of columns (F) Compensation other deferred benefits	Note. The sum of columns	o no (B)	ot list any individuals that)(i)-(iii) for each listed ind	are not listed on Form 9: lividual must equal the to	90, Part VII tal amount of Form 990,	Part VII, Section A, line 1	ta, applicable column (D)	and (E) amounts for tha	t ındıvıdual
SECONDO POLIDON 10 384,956 32,655 1,556 66,230 16,860 501,917 0 0 0 0 0 0 0 0 0			(B) Breakdown (i) Base	of W-2 and/or 1099-MISO	C compensation (iii) Other reportable	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B) reported as deferred on prior
Company		(i)	384,856	32,065	·	66,230	16,960	501,917	
2. PHILIP SQUARS OF PUBLIC SQUARS OF PUB	PRESIDENT & CEO		0						0
COVERNMENTAL AFFAIRS 10	2 PHILIP SQUAIR		129,418	18,000	631	24,662	23,654	196,365	0
3 BRIAN DUNAP (1) 169,814 16,000 1,525 18,846 8,116 214,301 0 0 0 0 0 0 0 0 0	COVERNMENTAL AFFAIRS		0	0	0	0	0	0	0
S	3 BRIAN DUNLAP	_	169,814	16,000	1,525	18,846	8,116	214,301	0
### A.JEFFEY PETRASH PY GENERAL COURSE (II)		(ii)	0	0	0		0		0
MICHAEL CALDARERA PARESULATORY AS PRESULATORY AS PRESULATORY AS PARESULATORY	4 JEFFREY PETRASH		180,527	17,500	4,669	12,053	16,001	230,750	0
5 MICHAEL CALDARERA PREGULATORS		(ii)	0	0	0	0	0	00	0
TECHNICAL SERVICES (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5 MICHAEL CALDARERA VP REGULATORY &		138,173	11,000	1,305	19,480	42,516	212,474	0
DIRECTION OF SAFETY AND CITY OF THE PROPERTY O	TECHNICAL SEDVICES	(ii)	0	0	0	0	0	0	0
CERTIFICATION CIT	DIRECTOR OF SAFETY AND	(i)	135,695	10,000	1,182	6,069	23,222	176,168	0
VICE PRESIDENT, STATE AFFAIRS (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CEDITIETCATION	(ii)	0	0	0	0	0	0	0
AFFAIRS (i) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(i)	126,149	17,000	263	6,891	38,965	189,268	0
8 BRUCE SWIECICK SENIOR TECHNICAL ADVISOR (i) 129,706 8,000 1,789 23,405 26,032 188,932 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ACEATOC	(ii)	0	0	0	0	0	0	0
ADVISOR (i) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	8 BRUCE SWIECICK		129,706	8,000	1,789	23,405	26,032	188,932	0
	ADVICOD	(ii)	0	0	0	0	0	0	0
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Cabadula 1 (C AAA) 3A4A								Cabadul -	1/Form 990\ 3012

chedule J (Form 990) 2018 Page 3				
Part III Supplemental Information				
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information				
Return Reference	Explanation			

MADE TO DATE THE AMOUNTS CONTRIBUTED FOR RICHARD ROLDAN DURING THE YEAR WERE \$29,730

efile GRAPH	IC print - DO NOT PROCESS		DLN: 93493013009280	
CCHEDIII	EO 0 1 1116 ()		OMB No 1545-0047	
SCHEDULE O (Form 990 or 990- EZ) Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.			2018	
Department of the T	► Attach to Form ► Go to <u>www.irs.gov/Form99</u>		Open to Public Inspection	
Namel Brtherofg	ambation E GAS ASSOCIATION	Employ	er identification number	
NATIONAL PROPAN	E GAS ASSOCIATION	36-2087	363	
Return Reference		Explanation		
FORM 990, PART VI, SECTION A, LINE 6	NPGA IS AN INCORPORATED 501(C)(6) NON-PROFIT T ISED OF ANY INDIVIDUAL, FIRM OR CORPORATION THATED LOCAL, STATE OR REGIONAL PROPANE ASSOCIANT AN ACCREDITED REPRESENTATIVE WHO IS AUTOR ASSOCIATION MATTERS DIRECTORS ON THE BOAI EPRESENTATIVE FROM EACH ACTIVE MEMBER PROHE PROPERTY OF NPGA SHALL BE IN PROPORTION TO ATION AND SHALL CEASE UPON THEIR EXPULSION OF	HAT IS ENGAGED IN THE LP-GAS INDICIATIONS CAN ALSO BE MEMBERS AG THORIZED TO CAST VOTES FOR SUC RD OF DIRECTORS ARE ELECTED BY PERTY RIGHTS AND INTEREST OF AC TO DUES PAID BY THEM RESPECTIVE	NGAGED IN THE LP-GAS INDUSTRY AFFILI CAN ALSO BE MEMBERS ACTIVE MEMBERS APP D TO CAST VOTES FOR SUCH ACTIVE MEMBER I RECTORS ARE ELECTED BY THE ACCREDITED R RIGHTS AND INTEREST OF ACTIVE MEMBERS IN T PAID BY THEM RESPECTIVELY TO THE ASSOCI	

Return Explanation
Reference

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

Return Explanation
Reference

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

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	UPON RECEIVING A DRAFT COPY OF THE FORM 990 FROM THE TAX PREPARERS, THE CFO REVIEWS THE FO RM 990 FOR ANY OMISSIONS OR NECESSARY UPDATES AS WELL AS TYING OUT THE FINANCIAL INFORMATI ON BACK TO THE AUDITED FINANCIAL STATEMENTS NEXT, NPGA'S AUDIT COMMITTEE, A STANDING COMM ITTEE OF THE BOARD OF DIRECTORS, REVIEWS THE DRAFT COPY OF THE FORM 990 DURING A CONFERENC E CALL MEETING PRIOR TO THE ACTUAL FILING WITH THE IRS BEFORE FILING, THE BOARD OF DIRECT ORS IS EMAILED A SECURED LINK TO THE FORM 990 THAT IS POSTED ON NPGA'S WEBSITE ALONG WITH A PASSWORD TO ACCESS THE FINAL FORM 990 AT THE NEXT BOARD OF DIRECTORS MEETING, THE AUDIT COMMITTEE WILL REPORT ON ITS REVIEW OF THE FORM 990

Return Explanation
Reference

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

Explanation Return Reference

990 Schedule O, Supplemental Information

PART VI.

LINE 15

FORM 990. THE CEO'S COMPENSATION AS WELL AS OTHER OFFICER AND KEY EMPLOYEES' COMPENSATION IS REVIEWE D ANNUALLY BY THE PERSONNEL SUBCOMMITTEE OF THE EXECUTIVE COMMITTEE. THE PERSONNEL SUBCOMM ITTEE USES SALARY BENCHMARKS FROM PUBLICATIONS SUCH AS THE ASAE COMPENSATION GUIDE TO ASSE

SECTION B. SS THE APPROPRIATE LEVEL OF COMPENSATION FOR EACH OF THESE POSITIONS AND THE DECISIONS ARE DOCUMENTED

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	NPGA'S GOVERNING DOCUMENTS SUCH AS THE CONSTITUTION, AND RULES & PROCEDURES ARE PRINTED IN NPGA'S MEMBERSHIP DIRECTORY OTHER POLICIES SUCH AS THE CONFLICT OF INTEREST POLICY, THE ANTITRUST POLICY AND THE WHISTLE-BLOWER POLICY ARE INCLUDED IN THE FRONT SECTION OF THE EX ECUTIVE COMMITTEE AND BOARD OF DIRECTOR PACKAGES ALL OF THE ABOVE REFERENCED GOVERNING DO CUMENTS AND POLICIES ARE AVAILABLE UPON REQUEST NPGA'S FINANCIAL STATEMENTS ARE PUBLISHED EACH YEAR IN NPGA'S ANNUAL REPORT WHICH IS POSTED ON NPGA'S WEBSITE FINANCIAL STATEMENT INFORMATION IS ALSO AVAILABLE THROUGH NPGA'S ANNUAL 990 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX FORM FILINGS COPIES OF BOTH THE ANNUAL REPORT AND 990 RETURN TAX FILINGS ARE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN IRC SECTION 6104(D)

990 Schedule O, Supplemental Information Return Explanation Reference

FORM 990, DEFERRED RENT ADJUSTMENT 38,231
PART XI.

LINE 9

Return Explanation

Reference	
FORM 990,	THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEP
PART XII,	ENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEA
LINE 2C	RS

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(Form 990)

NATIONAL PROPANE GAS ASSOCIATION

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. 2018

Employer identification number

DLN: 93493013009280

OMB No 1545-0047

Open to Public Inspection

Department of the Treasurs
Internal Revenue Service

Name of the organization

36-2087363 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (a) (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization (b) (c) (e) (g) Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1) NATIONAL PROPANE GAS FOUNDATION SCHOLARSHIP AWARDS DC 501(C)(3) LINE 7 NATIONAL PROPANE GAS Yes 1899 L STREET NW SUITE 350 ASSOCIATION WASHINGTON, DC 20036 23-7122755 (2) NATIONAL PROPANE GAS ASSOCIATION POLITICAL ACTION COMMITTEE DC POLITICAL ACTION 527 NATIONAL PROPANE GAS Yes 1899 L STREET NW SUITE 350 COMMITTEE ASSOCIATION WASHINGTON, DC 20036 36-3175428 Cat No 50135Y Schedule R (Form 990) 2018 For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percent owners
					314)			Yes	No		Yes	No	
					1								
Identification of Related Organiz because it had one or more related of	ations Taxable as a (Corporation s a corporation	or Trus	t Complete st during th	ıf the organ	ızatıon ansv	wered "Yes	" on Fo	orm 99	90, Part IV	, lıne	34	
Identification of Related Organiz because it had one or more related of (a) Name, address, and EIN of related organization	ations Taxable as a Gorganizations treated as (b) Primary activity	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e)	vered "Yes (f) Share of total income	Share	(g) of end- year assets	of- Perce	, line h) intage	Se (1	(I) ection 51 .3) contr entity
because it had one or more related ((a) Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 .3) contr
because it had one or more related ((a) Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 3) contr entity
because it had one or more related ((a) Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 3) contr entity
because it had one or more related ((a) Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 3) contr entity
because it had one or more related ((a) Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 51 3) contr entity

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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, 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 orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	П		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1 b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1 d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1 i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	T
o Sharing of paid employees with related organization(s)	10	Yes	
o sharing of paid employees with related organization(s)			H

Lease of facilities, equipment, or other assets to related organization(s)	[1j		No
Lease of facilities, equipment, or other assets from related organization(s)	1k		No
Performance of services or membership or fundraising solicitations for related organization(s)	11		No
Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
Sharing of paid employees with related organization(s)	10	Yes	
Reimbursement paid to related organization(s) for expenses	1 p		No
	Lease of facilities, equipment, or other assets to related organization(s)	Lease of facilities, equipment, or other assets from related organization(s)	Lease of facilities, equipment, or other assets from related organization(s)

1q Yes **q** Reimbursement paid by related organization(s) for expenses 1r Yes **1**s Yes 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 (d) Method of determining amount involved (a) Name of related organization (b) (c) Amount involved Transaction type (a-s)

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
													_		
													_		
	•								•	Schedul	e R (Forn	1 99	0) 2018		

