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## Form 990-EZ

Department of the Treasury

Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code

(except black lung benefit trust or private foundation)

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

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

OMB No 1545-1150

2009

**Open to Public** Inspection

Α	For th	ne 2009 caler	<u>ndar year,</u>	or tax year beginn	ning		, and	l ending				
В	Check	ıf applıcable	Please	C Name of organi	zation				D Employ	er ident	ification n	umber
X	Addres	s change	use IRS	COUTUITEVAC CE	TION OF THE AMERI	CAN INSTITUTE OF	CHEMICAL	ENCINEEDS		22.7	429667	
	Name o	change	label or print or						E Teleph			
	Initial re	eturn	type.	Number and street	(or P O box, if mail is not di	envered to sueet address)		Room/suite				
	Termin	ated	See	POST OFFICE I	BOX 820252					(361)	522-977	<u>'4</u>
	Amend	ed return	Specific Instruc-	City, town, or co	untry	State	ZIP	+ 4	F Group	Exemp	tion	
	Applica	ition pending	tions.	HOUSTON		TX	77:	282	Numb	er	<b>•</b>	2603
•	Sectio	n 501(c)(3) c	rganizatio	ons and 4947(a)(1)	nonexempt charit	able trusts must	attach	G Accounting	g Method	X	Cash	Accrual
			a compl	eted Schedule A (	Form 990 or 990-E	Z).		Other (sp	<b>_</b>			
								H Check ▶	X if the	organi	zation is	not
1	Websit	te: ► <u>http://</u>	www sts-						o attach S	chedule	B (Form	990,
J	Tax-exe	mpt status (ch	eck only one)	)X_501(c) (	3 ) <b>◄</b> (insert no )	4947(a)(1) or	527	990-EZ, c	r 990-PF)			
ĸ	Check	▶ if the	organizati	on is not a section	509(a)(3) supporting	organization and	its gross re	eceipts are no	rmally not	more ti	nan \$25,0	000
	A Form				, but if the organizat							
L	Add lines	s 5b, 6b, and 71	o, to line 9 to	determine gross rece	ipts, if \$500,000 or mo	re, file Form 990 inste	ad of Form 9	990-EZ	<b>&gt;</b>	\$		117,672
Pa	art I	Revenue	, Expens	ses, and Chan	ges in Net Asse	ets or Fund Ba	lances (	See the ins	tructions	for P	art I)	
	1	Contribution	ons, gifts,	grants, and simil	ar amounts receiv	/ed				1		0
	2	Program s	ervice rev	venue including g	overnment fees a	nd contracts			· L	2		89,733
	3	Membersh	ip dues a	ind assessments						3		27,824
	4	Investmen	t income							4		115
	5a	Gross amo	ount from	sale of assets of	her than inventory	<i>t</i> .	5a		0			
	b	Less: cost	or other I	basıs and sales e	xpenses		5b		0			
a	С	•	•		er than inventory					ic _		0
Revenue	6	•			parts of Schedule G) I		gaming, che	ck here				
Ve	а		•	including \$		of contributions						
Re							6a		<u> </u>			
	b				draising expenses		6b		0			
	С				ents and activities		b from line	e 6a) .	<u> </u> 6	ic		0
	7a				s and allowances		7a					
	b	Less. cost					_7b			-		_
,	C	•	•	•	ventory (Subtract	line 7b from line	/a)	•	<u> </u>	<u>'c   </u>		0
•	8	Other reve			- 0- 710	<del></del>			— ′ <del>                                    </del>	8 9		0
_	9			l lines 1, 2, 3, 4, 5		••	• • •			0		117,672
	10			amounts paid (att	ach schedule) .				. —	1		12,000
<b>,</b> 0	11 12			or members .	mployee benefits		FOFI	VED.	· —	2		
enses	13				ts to independent	contractors B	ECEI	VLID		3		600
ē				ilities, and mainte		1		19	/ L	4		
Exp	15			is, postage, and s		[2]	9.0. DUA	.5010 . 19		5		
	16				ttached Statemer		AUG O		<u>-</u>  )   1	6		106,611
	17	•	•	dd lines 10 throug		1	SOF	TII. IA	<del>*</del> '	7		119,211
	18				act line 17 from li	ne 9) . ( (	)GUL	l Va.	. 1	8		-1,539
Net Assets	19				ning of year (from	line 27, cotumn	(A)) (mus	st agree with				
Ass		end-of-yea	ir figure re	eported on prior y	rear's return)				<u>  1</u>	9		93,783
et '	20	Other char	nges in ne	et assets or fund	balances (attach	explanation) .			<b>⊢</b>	20		0
z	21_				f year Combine I			<u>.</u>		1		92,244
P	art II	Balance			n line 25, column (	(B) are \$1,250,0	00 or more			d of F	<u>orm 990</u>	-EZ.
			•	the instructions fo	or Part II.)			(A) Beginn	_		(B) End o	
22		, savings, a					•	<u> </u>	93,783			92,244
23		and buildin								23		
24		r assets (de					)	<u> </u>	02 702			00.044
25								<del></del>	93,783			92,244
26	l otal	l liabilities	uescribe	ces (line 27 of or	olumn (B) must ag	gree with line 21	·,	<u> </u>	0 93,783			92,244
21	net a	isseis Of TU	mu vaidi	1069 (IIIIC 27 OI C	אווווו (ט) ווווואנ מ	gree with tille 21	<i>j</i>	1	30,703	. 41		32,244

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009)

Form	990-EZ	(2009)
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COUTH TEVAC	CECTION OF THE	AMERICAN INSTITUT	LE VE VIIENIVYI	E122 7420667

Page 2

Pa	It III Statement of Program Service Acc	comp	lishments (See the	instructions for P	art III.)		Expenses
	at is the organization's primary exempt purpose?						uired for section
Des	cribe what was achieved in carrying out the organi	ization	's exempt purposes. Ir	n a clear and concis	se		(3) and 501(c)(4)
man	iner, describe the services provided, the number o	f pers	ons benefited, and oth	er relevant informa	tion for		(a)(1) trusts, optional
	n program title.					for ot	hers)
28	STATEMENT ATTACHED FOLLOWING SCHED	ULE V				.	
						.	
					<u></u> -	<u>.</u>	ł
	(Grants \$ 0 ) If this amou	nt incl	udes foreign grants, cl	neck here	<b>▶</b> _	_ 28a	106,611
29							
							1
						.	
	(Grants \$ 0 ) If this amou	nt incl	udes foreign grants, ch	heck here	. ▶ [	]   29a	l c
30							
		nt incl	udes foreign grants, ch	neck here	. ▶	]   30a	l o
31	Other program services (attach schedule)				<del>_</del>		
			udes foreign grants, ch		. ▶ □	]   31a	,
	Total program service expenses. (add lines 28a					32	106,611
	rt IV List of Officers, Directors, Trustees, a				nsated (Se		
	List of Officers, Directors, Trustees, a		(b) Title and average	(c) Compensation	(d) Contri		(e) Expense
	(a) Name and address		hours per week	(If not paid, enter -0)	employee be deferred co		account and
SCL	IEDULE	Title	devoted to position	enter -o)	delerred co	mpensauon	other allowances
<u> </u>	IEDOLE	1		0		0	0
ATT	ACHED	Hr/WK		<u> </u>	<u> </u>	- 0	
211	ACHED	Title				0	,
	LOVAUNIO	Hr/WK		0	<del> </del>	0	
FUL	LOWING	Title				•	
		Hr/WK		0	ļ	0	0
SCH	IEDULE A	Title					
		Hr/WK		0		0	0
		Title					
		Hr/WK	. 00	0		0	0
		Title					
		Hr/WK	.00	0		0	0
		Title	!				
		Hr/WK	00	0		0	0
		Title	•				
		Hr/WK	.00	0		0	0
		Title					
		Hr/WK	.00			0	0
		Title					•
		Hr/WK	.00	0		0	0
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		H <sub>r</sub> /WK		0		0	0
		Title				_	
		H <sub>r</sub> /WK		0		0	0
		Title					
		HEARIN	00	ı nı		Λl	n

42b	Х
•	
42c	Х

Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here . . . . . . . . . . . . . . . . 43

and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . . ▶ 43 N/A

44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of
	Form 990-EZ
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If
	"Yes." Form 990 must be completed instead of Form 990-EZ

Form 990-EZ (2009)

Yes

44

No

Х

Preparer's

Use Only

Firm's name (or yours if self-employed), address and ZIP + 4

Form 9!	0-EZ (2009) SOUTH TEXAS SECTION OF	THE AMERIC	AN INSTITUTE	OF CHEMICAL E	NGINEERS 23	-74296	367	Page 4
Part	VI Section 501(c)(3) organizations and	section 494	7(a)(1) nonexe	empt charitable	trusts only. All	section	n	
	501(c)(3) organizations and section 494		exempt charita	ble trusts must a	nswer questions	46-49	∌b	
40	and complete the tables for lines 50 and			habalf of ar in our	anition to		Yes	No
46	Did the organization engage in direct or indirect p	•	-	benait of or in opp	osition to	46	res	No X
47	candidates for public office? If "Yes," complete So Did the organization engage in lobbying activities			C. Part II.		47		x
47 48	Is the organization a school as described in section				 E	48		x
40 49 a	Did the organization make any transfers to an exe				<b>L</b>	49a		x
	If "Yes," was the related organization a section 52	•		•		49b		<del>  ^</del> -
50	Complete this table for the organization's five high				s. directors. truste		kev	ı
	employees) who each received more than \$100,0							
	(a) Name and address of each employee paid more than \$100,000	hours	and average per week to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	a	e) Expens count as er allowar	nd
Name	NONE Str	Title			•			
City	ST ZIP	Hr/WK	00	0	0			
Name	Str	Title			<del>-</del>			
City	ST ZIP	Hr/WK	00	0	0			(
Name	Str	Title	İ					
City	ST ZIP	Hr/WK	00	0	0			(
Name	Str	Title			_			
City	ST ZIP	Hr/WK	00	0	0			
Name City	<u>Ştr</u> ST ZIP	. Title Hr/WK	.00	0	0			
51	Complete this table for the organization's five high \$100,000 of compensation from the organization				each received mo	re thar	1	
	(a) Name and address of each independent contractor	r paid more than \$	100,000	(b) Typ	e of service	(c) Co	mpensati	ion
Name	NONE Str							
City	ST	ZIP						
Name	Str							
City	ST	ZIP						
Name	Str							
City	ST	ZIP		-				
Name	Str							
City	ST	ZIP						
Name	Str	710			1			
City d	ST  Total number of other independent contractors ea	ZIP ach receiving (	over \$100 000	<b>•</b>				
u	Total number of other independent contractors ca	aci receiving (	νει ψ100,000 :					
Sign	Under penalties of perjury, I declare that I have examined and belief, it is true, correct, and complete Declaration of	d this return, inclu- of preparer (other t	ding accompanying s han officer) is based	chedules and statement on all information of whi	s, and to the best of my ch preparer has any kno H31 201	wledge	ge	
Here	Signature of officer HIREN PATAN	I. Tre	asver	<u> </u>	Date			
	Type or print name and title		15.	Loverno				
Paid	Preparer's supparture	VIIIA	Date	Check if self-	Preparer's identi	fying num	Der (See in	structions

KAMERLING & DOUGLASS INCORPORATED
4709 MERWIN STREET, HOUSTON, TX 77027-6607

May the IRS discuss this return with the preparer shown above? See instructions . . . .

No

► X Yes

EIN

Phone no ► 713 627-7560

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

20**09** Open to Public

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 23-7429667 SOUTH TEXAS SECTION OF THE AMERICAN INSTITUTE OF CHEMICAL ENGINEERS Reason for Public Charity Status (All organizations must complete this part ) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_ An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives. (1) more than 33 1/3 % of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III-Functionally integrated Type III-Other Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? . . . . 11g(i) A family member of a person described in (i) above? . 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . 11g(iii) Provide the following information about the supported organization(s) h (III) Type of organization (iv) Is the organization (v) Did you notify (vii) Amount of (vi) Is the (i) Name of supported (ii) EIN (described on lines 1-9 in col (i) listed in your support the organization in organization in col organization above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? Yes No Yes Yes 0 0 0 0 0 0 Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total "Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") . . . 0 0 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. 0 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . 0 0 Total. Add lines 1 through 3 . . . . . 0 0 0 0 0 0 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . Public support. Subtract line 5 from line 4. 0 Section B. Total Support (a) 2005 Calendar year (or fiscal year beginning in) ▶ **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 0 0 0 0 0 7 Amounts from line 4 . . . . . . . . . . . . 0 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar 0 sources . . . . . . . . . . . . . . . 9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . . . 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . . . . 0 11 Total support. Add lines 7 through 10. 0 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 0 00% Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)). 15 16a 33 1/3% support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 18

Schedule A (Form 990 or 990-EZ) 2009 SOUTH TEXAS SECTION OF THE AMERICAN INSTITUTE OF CHEMICAL ENGINEERS7

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

(Complete only if you checked the box on line 9 of Part I.)

<u></u>	(Complete only if you checked to	<u>ne box on line</u>	9 of Part I)		<del>-</del>	·	
	tion A. Public Support	(0) 2005	(h) 2006	(-) 2007	(4) 2009	(a) 2000 T	(6) T-1-1
Can	endar year (or fiscal year beginning in) 🕨 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	26,530	16,890	20,426	23,828	27,824	115,498
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished					l	
	in any activity that is related to the						
	organization's tax-exempt purpose	23,591	47,207	29,137	51,735	89,733	241,403
3	Gross receipts from activities that are not an					1	
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on	_					_
_	its behalf	0	0				0
5	The value of services or facilities						
	furnished by a governmental unit to the		ام				0
6	organization without charge	50,121	64,097	49,563	75,563	117,557	<u>0</u> 356,901
	Total. Add lines 1 through 5. Amounts included on lines 1, 2, and 3		04,097	49,303	75,505	117,337	300,901
<i>1</i> a	received from disqualified persons						0
	received from disqualified persons					<del></del>	
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that		į				
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from	1					050.004
	line 6.)			<u></u> _l			356,901
	tion B. Total Support	(=) 0005	(h) 2006	(=) 2007	(4) 2000	(=) 2000	(O Takal
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	50,121	64,097	49,563	75,563	117,557	356,901
10a	Gross income from interest, dividends,	İ				j	
	payments received on securities loans,			1		1	
	rents, royalties and income from similar						
	sources	744	1,261	2,467	2,269	115	6,856
ь	Unrelated business taxable income (less	ļ	)	1		ļ	
	section 511 taxes) from businesses						0
_	acquired after June 30, 1975	744	1,261	2,467	2,269	115	0 6,856
С 11	Add lines 10a and 10b		1,201		2,209	115	0,650
• •	activities not included in line 10b,	1	1	İ	1	į	
	whether or not the business is regularly						
	carried on						0
12	Other income. Do not include gain or			-		-	
-	loss from the sale of capital assets		1		i		
	(Explain in Part IV )	ol	ol		1		0
13	Total support. (Add lines 9, 10c, 11,			· i		-	
	and 12)	50,865	65,358	52,030	77,832	117,672	363,757
14	First five years. If the Form 990 is for the org	anization's firs	t, second, third	, fourth, or fifth	tax year as a	section 501(c)(	3)
	organization, check this box and stop here.						▶ 🗀
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2009 (line 8, co	olumn (f) divide	d by line 13, co	olumn (f))		15	98.12%
16	Public support percentage from 2008 Schedu	, ,	-			16	97 48%
Sec	tion D. Computation of Investment Inco						
17	Investment income percentage for 2009 (line	10c, column (f)	divided by line	e 13, column (f	))	17	1.88%
18	Investment income percentage from 2008 Sch				·	18	2.52%
19a	· · ·			line 14, and line	e 15 is more th	an 33 1/3% an	
	not more than 33 1/3%, check this box and st						▶ X
Ь	33 1/3% support tests-2008. If the organization di	d not check a bo	x on line 14 or lir	ne 19a, and line	16 is more than :	33 1/3% and	
	line 18 is not more than 33 1/3%, check this box an	d stop here. The	e organization qu	ialifies as a publi	cly supported or	ganızation	▶ 🛄
20	Brivate foundation If the graphization did no	t chack a hav	on line 14, 10a	or 10h aback	this hav and s	on instructions	

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;  Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions
•	
•	
*	

S Paid
Amounts
Similar 4
and
Grants and
) (990-EZ) - Grants
0
7
Line 10
-
Part I,

5	111 10 1000	arti, Eme 10 (200-EE) - Clanes and Chimal Amounts I and	Dalles Lai	3				
			Check (X) If					
			grantee is					•
	Class of activity	Grantee's name	a business	Address	Oity	State	Zip code	Foreign Country
-	SCHOLARSHIP	CHRISTOPHER T. BUCHER						
7	SCHOLARSHIP	LAURA TIMMERMANN						
3	SCHOLARSHIP	ROBERT WYDRA						
4	SCHOLARSHIP	STEPHEN POPE						
2	SCHOLARSHIP	IOANA IACOB						
9	SCHOLARSHIP	TROY BRETZ						
7	SCHOLARSHIP	MARCUS J DAVIS						
8	SCHOLARSHIP	DEMARCUS D DOBY						
၈	SCHOLARSHIP	CHARELL N SCOTT						
9	SCHOLARSHIP	JOSIAH CANTA						
7	SCHOLARSHIP	RICHARD M						
12	SCHOLARSHIP	DONG NI SU						
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	, Date received																
	Method used to determine FMV			:													
0	Fair market																
	How book value determined																
0	Book value																
	Purpose of payment to affiliate																
	Description of the property								:								
	Amount of cash grant Relationship	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE				
12,000	Amount of cash grant	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000				

Pa	art I, Line 16 (990-EZ) - Other Expenses		106,611
1	Travel	1	<u> </u>
2	Meals and entertainment	2	
3	Fundraising	3	
4	Amortization	4	0
5	Conferences, conventions, and meetings	5	
	Depreciation	<u> </u>	0
7	Depletion	7 —	
8	Equipment rental and maintenance	8	
9		9	
	Supplies	10	
	Telephone	11	
	Unrelated business income taxes	12	0
	AWARDS	13	1,598
	CREDIT CARD FEES	14	416
	CEO REIMBURSED EXPENSES	15	100
	F E. EXAM FEES	16	3,125
17		17	
18	SCIENCE FAIR EXPENSES	18	5,742
19	ENGINEERS COUNCIL OF HOUSTON DUES & MEETINGS	19	42,696
	EXECUTIVE COMMITTEE	20	1,177
	POSTAGE	21	100
	NATIONAL MEETING EXPENSES	22	876
23		23	
	PROCESS TECHNOLOGY CONFERENCE EXPENSES	24	36,021
25	STORAGE	25	640
26		26	8,000
27		27	100
	WEB SITE MAINTENANCE	28	120
	YOUNG MEMBERS COMMITTEE	29	6,000
30		30	<del></del>
31		31	
32		32	
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#### SOUTH TEXAS SECTION OF THE AMERICAN INSTITUTE OF CHEMICAL ENGINEERS

FORM 990-EZ, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS
THE SOUTH TEXAS SECTION OF THE AMERICAN INSTITUTE OF CHEMICAL ENGINEERS ATTEMPTS TO FURTHER
THE AIMS AND PURPOSES OF THE AMERICAN INSTITUTE OF CHEMICAL ENGINEERS AND THE ADVANCEMENT OF
THE SCIENCE OF CHEMICAL ENGINEERING AND OF RELATED SCIENCES THROUGH THE EDUCATION OF
• MEMBERS AND NON MEMBERS IN THE CHEMICAL ENGINEERING AND RELATED SCIENCES, CAREER GUIDANCE
AND FINANCIAL ASSISTANCE TO STUDENTS OF CHEMICAL ENGINEERING AND THE ENCOURAGEMENT OF
RESEARCH IN THE SCIENCE OF CHEMICAL ENGINEERING
TO ACCOMPLISH THESE AIMS AND PURPOSES THE SOUTH TEXAS SECTION ENGAGES IN THE FOLLOWING
ACTIVITIES:
1. REGULAR MONTHLY MEETINGS OF THE MEMBERSHIP AT WHICH TOPICS OF INTEREST TO THE CHEMICAL
FNGINEERING COMMUNITY ARE PRESENTED
2. PUBLICATION OF A MONTHLY NEWSLETTER CONTAINING INFORMATION OF INTEREST TO THE CHEMICAL
ENGINEERING COMMUNITY
3. PARTICIPATION IN SCIENCE FAIRS AND OTHER ACTIVITIES DESIGNED TO MAKE INFORMATION AVAILABLE TO
THE GENERAL PUBLIC AND THE CHEMICAL ENGINEERING COMMUNITY
4. AWARDING OF SCHOLARSHIPS TO STUDENTS INTERESTED IN CHEMICAL ENGINEERING AND OTHER
RELATED SCIENCES

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## **Executive Board**

## Leadership

#### Officers

Chair	Alan Rossiter	Rossiter & Associates	sts-chair@aiche org				
Chair Elect	Ken Cox	Rice University	sts-chairelect@aiche org				
Past Chair	Todd Willman	Epcon International	sts-pastchair@aiche org				
Secretary	Carol Schmidt		sts-secretary@aiche org				
Treasurer	Hiren Patani		sts-treasurer@aiche org				

#### **Executive Committee**

Position 1 <i>Education</i>	Gary Gildert	Johnson Matthey Catalysts	sts-position1@aiche org		
Position 2 <i>Outreach</i>	Ramanan Krishnamoorti	University of Houston	sts-position2@aiche org		
Position 3 Communications	Daniel Shiosaki	Lyondell-Basell	sts-position3@aiche org		
Position 4 <i>Human</i> Resources	John Super	KBR Engineering	sts-position4@aiche.org		

U. S. Mail

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