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

2009

► 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 requirementsOpen to Public
Inspection

A For the 2009 calendar year, or tax year beginning 7/01 , 2009, and ending 6/30 , 2010

B Check if applicable

- Address change
- Name change
- Initial return
- Termination
- Amended return
- Application pending

Please use IRS
label or
print or
type.
See
Specific
Instruc-
tions.

C
HOUSTON CHEMICAL ASSOCIATION
12436 FM 1960 WEST PMB 158
HOUSTON, TX 77065

D Employer identification number

76-0233175

E Telephone number

281-272-4115

F Group Exemption
Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts
must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: Cash Accrual
Other (specify) ►

I Website: ► N/A

J Tax-exempt status (check only one) — 501(c) (6) ▶ (insert no.) 4947(a)(1) or 527K Check ► If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ

► \$ 103,116.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	
3	Membership dues and assessments	3	8,193.
4	Investment income	4	390.
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ► <input type="checkbox"/>	6	
a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	94,533.
b	Less: direct expenses other than fundraising expenses	6b	66,715.
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	27,818.
7a	Gross sales of inventory, less returns and allowances	7a	
b	Less: cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ► _____)	8	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	36,401.
10	Grants and similar amounts paid (attach schedule)	10	28,000.
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	1,095.
14	Occupancy, rent, utilities, and maintenance	14	
15	Printing, publications, postage, and shipping	15	
16	Other expenses (describe ► SEE STATEMENT 2)	16	9,258.
17	Total expenses. Add lines 10 through 16	17	38,353.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-1,952.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	67,517.
20	Other changes in net assets or fund balances (attach explanation)	20	1,459.
21	Net assets or fund balances at end of year Combine lines 18 through 20	21	67,024.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22	67,517.	22
23		23
24		24
25	67,517.	25
26	0.	26
27	67,517.	27

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

Form 990-EZ (2009) 2

Part III Statement of Program Service Accomplishments (See the instructions.)

What is the organization's primary exempt purpose? SEE STATEMENT 3

What is the organization's primary exempt purpose? See Statement
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts, optional for others.)

28 SEE STATEMENT 4

(Grants \$ 27,500.) If this amount includes foreign grants, check here

28a

29 DONATION TO SPECIAL EVENT - "YOU BE THE SCIENTIST"

(Grants \$ 500.) If this amount includes foreign grants, check here

29a

30

(Grants \$) If this amount includes foreign grants, check here

30 a

31 Other program services (attach schedule) . . .

(Grants \$) If this amount includes foreign grants, check here

31 a

32 Total program service expenses(add lines 28a through 31a)

32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instrs.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
RON MUNOS	PRESIDENT	0.	0.	0.
12436 FM 1960 WEST PMB 158		8.00		
HOUSTON, TX 77065				
TONI CANNATA	VICE PRESIDENT	0.	0.	0.
12436 FM 1960 WEST PMB 158		5.00		
HOUSTON, TX 77065				
LARRY ITO	SECRETARY	0.	0.	0.
12436 FM 1960 WEST PMB 158		5.00		
HOUSTON, TX 77065				
GORDON KATO	EXITING PRES	0.	0.	0.
124236 FM 1960 WEST PMB 158		3.00		
HOUSTON, TX 77065				
DAVID FORTUNE	TREASURER	0.	0.	0.
12436 FM 1960 WEST PMB 158		5.00		
HOUSTON, TX 77065				

Part V Other Information (Note the statement requirements in the instrs for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a	0.	0.
b Did the organization file Form 1120-POL for this year?		
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved	38b	N/A
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	N/A
b Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I		
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0.		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ► 0.		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T		
41 List the states with which a copy of this return is filed ► NONE		
42a The organization's books are in care of ► LARRY ITO Telephone no. ► 713-628-4828 Located at ► 12436 FM 1960 WEST PMB 158 HOUSTON TX ZIP + 4 ► 77065		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country: ► _____	42b	X
42c See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: ► _____	42c	X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43	43	N/A
44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45	X

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46 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

47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If 'Yes,' was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

Sign Here	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		
		MAY 16, 2011	Date
	► Signature of officer		
	LARRY N. ITO		
	► Type or print name and title		
Paid Preparer's Use Only	Preparer's signature		Date
	Firm's name (or yours if self-employed), address, and ZIP + 4	SLOAN & KUECKER, P.C.	5/11/11
		1234 BAY AREA BLVD, SUITE D HOUSTON, TX 77058-2538	EIN ► 76-0655741
		Preparer's Identifying Number (See Instructions) P00236645	
		Phone no ► (281) 488-7273	

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

BAA

► X Yes N

Form 990-EZ (2009)

Supplemental Information Regarding Fundraising or Gaming Activities

2009

Open to Public
Inspection

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

HOUSTON CHEMICAL ASSOCIATION

Employer identification number

76-0233175

Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.

Part I Form 990EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- Mail solicitations
- Internet and email solicitations
- Phone solicitations
- In-person solicitations

- Solicitation of non-government grants
- Solicitation of government grants
- Special fundraising events

2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? . . . Yes No

Yes No

Yes

Yes No

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

Total

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part III **Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1 CHRISTMAS EVEN (event type)	(b) Event #2 GOLF OUTINGS (event type)	(c) Other Events 1 (total number)	(d) Total Events (Add col. (a) through col. (c))
		37,664.	37,215.	14,890.	89,769.
1	Gross receipts				
2	Less: Charitable contributions				
3	Gross income (line 1 minus line 2)	37,664.	37,215.	14,890.	89,769.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	27,899.	21,349.	14,082.	63,330.
	10 Direct expense summary. Add lines 4 through 9 in column (d).				63,330.
	11 Net income summary. Combine lines 3, column (d) and line 10				26,439.

Part III **Gaming.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
1	Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d).				
	8 Net gaming income summary. Combine lines 1, column (d) and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? _____

b If 'No,' explain:

YES	NO
9a	

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If 'Yes,' explain:

YES	NO
10a	

11 Does the organization operate gaming activities with nonmembers?...

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

YES	NO
11	

YES	NO
12	

13 Indicate the percentage of gaming activity operated in:

a The organization's facility
b An outside facility

	YES	NO
13a	%	
13b	%	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name: ► _____

Address: ► _____

15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?

b If 'Yes,' enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____.

c If 'Yes,' enter name and address of the third party:

Name: ► _____

Address: ► _____

16 Gaming manager information

Name: ► _____

Gaming manager compensation ► \$ _____

Description of services provided: ► _____

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year: ► \$ _____

17a		

STATEMENT 1
FORM 990-EZ, PART I, LINE 10
GRANTS AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	ZACHARY DREYFUSS	
DONEE'S ADDRESS:	5215 PITT ST	
	NEW ORLEANS, LA 70115	
CASH AMOUNT GIVEN:		\$ 2,500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	NICOLE SCOTT	
DONEE'S ADDRESS:	1615 WEST LAKE DR	
	GLADEWATER, TX 75647	
CASH AMOUNT GIVEN:		\$ 2,000.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	JENNA PONZI	
DONEE'S ADDRESS:	118 E FAIRBRANCH CIRCLE	
	THE WOODLANDS, TX 77382	
CASH AMOUNT GIVEN:		\$ 2,000.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	TAYLOR GASPARD	
DONEE'S ADDRESS:	11 BAYAU RD	
	LAKD JACKSON, TX 77566	
CASH AMOUNT GIVEN:		\$ 1,500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	ROBERT GREENE	
DONEE'S ADDRESS:	2905 HARVEST HILL DR	
	FRIENDSWOOD, TX 77546	
CASH AMOUNT GIVEN:		\$ 1,500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	COLE KOHUT	
DONEE'S ADDRESS:	17710 SURREYWEST LANE	
	SPRING, TX 77379	
CASH AMOUNT GIVEN:		\$ 1,500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	ERIC MARTINEZ	
DONEE'S ADDRESS:	2250 DARTSMOUTH ST APT 422	
	COLLEGE STATION, TX 77840	
CASH AMOUNT GIVEN:		\$ 1,500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	AMANDA DREYFUSS	
DONEE'S ADDRESS:	10901 WILLOWISP	
	HOUSTON, TX 77035	
CASH AMOUNT GIVEN:		\$ 2,000.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	MEGAN HACAS	
DONEE'S ADDRESS:	1107 MABRY HILL RD	
	HOUSTON, TX 77062	
CASH AMOUNT GIVEN:		\$ 1,500.

STATEMENT 1 (CONTINUED)
FORM 990-EZ, PART I, LINE 10
GRANTS AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	MALLORY HACAS	
DONEE'S ADDRESS:	1107 MABRY HILL RD	
CASH AMOUNT GIVEN:	HOUSTON, TX 77062	\$ 1,000.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	LAURA DE LA CRUZ	
DONEE'S ADDRESS:	5102 WALNUT HILLS	
CASH AMOUNT GIVEN:	KINGWOOD, TX 77345	\$ 1,000.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	CHRISTOPHER KATO	
DONEE'S ADDRESS:	17614 BEAR RIVER LN	
CASH AMOUNT GIVEN:	HUMBLE, TX 77346	\$ 1,500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	JOSEPH SCOTT	
DONEE'S ADDRESS:	1615 WEST LAKE DR	
CASH AMOUNT GIVEN:	GLADEWATER, TX 75647	\$ 1,500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	JONATHAN HART	
DONEE'S ADDRESS:	9611 CAFE TERRACE	
CASH AMOUNT GIVEN:	SAN ANTONIO, TX 78251	\$ 1,500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	PHILLIP MORGAN	
DONEE'S ADDRESS:	15838 COUNTRY TRAIL	
CASH AMOUNT GIVEN:	TOMBALL, TX 77377	\$ 1,000.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	ERICA FORERO	
DONEE'S ADDRESS:	5712 LINDEN ST	
CASH AMOUNT GIVEN:	BELLAIRE, TX 77401	\$ 1,000.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	SARAH ROBERTSON	
DONEE'S ADDRESS:	5839 LAUREL CAVERNS	
CASH AMOUNT GIVEN:	KINGWOOD, TX 77345	\$ 1,000.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	KANDACE MALONE	
DONEE'S ADDRESS:	13710 GREENWOOD MANOR	
CASH AMOUNT GIVEN:	CYPRESS, TX 77429	\$ 500.

2009

FEDERAL STATEMENTS

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HOUSTON CHEMICAL ASSOCIATION

76-0233175

STATEMENT 1 (CONTINUED)
FORM 990-EZ, PART I, LINE 10
GRANTS AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	RICHARD WILLIAMS	
DONEE'S ADDRESS:	8437 BOIS D' ARC LN	
RICHMOND, TX 77406		
CASH AMOUNT GIVEN:		\$ 500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	ANDREA FORERO	
DONEE'S ADDRESS:	4712 LINDEN ST	
BELLAIRE, TX 77401		
CASH AMOUNT GIVEN:		\$ 500.
CLASS OF ACTIVITY:	SCHOLARSHIP	
DONEE'S NAME:	MICHAEL GARCIA	
DONEE'S ADDRESS:	8060 SPENCER HIGHWAY	
PASADENA, TX 77505		
CASH AMOUNT GIVEN:		\$ 500.
CLASS OF ACTIVITY:	DONATION	
DONEE'S NAME:	"YOU BE THE SCIENTIST" EVENT	
HOUSTON, TX		
CASH AMOUNT GIVEN:		\$ 500.

STATEMENT 2
FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

ADMINISTRATIVE ASSISTANT	\$ 4,800.
BANK CHARGES	33.
INSURANCE	1,023.
MAILBOX	125.
MERCHANT SERVICE FEES	2,517.
MISCELLANEOUS	760.
TOTAL	\$ 9,258.

STATEMENT 3
FORM 990-EZ, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

FOSTER AND PROMOTE EDUCATION OF ITS MEMBERS AND THE PUBLIC OF CHEMICAL
MANUFACTURING AND DISTRIBUTION.

2009

FEDERAL STATEMENTS

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HOUSTON CHEMICAL ASSOCIATION

76-0233175

STATEMENT 4
FORM 990-EZ, PART III, LINE 28
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

SCHOLARSHIPS AWARDED TO COLLEGE STUDENTS -

1 - \$2500 SCHOLARSHIP
3 - \$2000 SCHOLARSHIPS
8 - \$1500 SCHOLARSHIPS
5 - \$1000 SCHOLARSHIPS
4 - \$500 SCHOLARSHIPS