

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

803497

_	MB APP	
	Number	

Expires: May 31, 2002

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SEC USE ONLY
Prefix Serial

DATE RECEIVED

Name of Offering ([] check if this is an amendment and name	has changed, and indicate change.)
Skyline Chili, Inc. offering of \$11 million in subordinated notes as	nd \$5,131,200 in common shares
Filing Under (Check box(es) that apply): Type of Filing: [x] New Filing [] Amendment	[x]Rule 506 []Section 4(6) []ULOE
A. BASIC IDENTIFICATION	DATA
Enter the information requested about the issuer	
Name of Issuer ([] check if this is an amendment and name has Skyline Chili, Inc.	as changed, and indicate change.)
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
4180 Thunderbird Ln, Fairfield, OH 45014	(513) 874-1188
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	PROCESSED
Operation and franchising of restaurants	NOV 21 2005 THOMSON FRANCIAL

Page 1 of 12 Pages

		. *	•
Type of Business Organiz	ation		
[x] corporation	[] limited partr	nership, already formed	[] other (please specify):
[] business trust	[] limited partr	ership, to be formed	
		Month Year	
Actual or Estimated Date	of Incorporation or Orga	nization: [0] 6][6] 5	[x] Actual [] Estimate
Jurisdiction of Incorporation	• ,		Service abbreviation for State: gn jurisdiction) [O][H]
GENERAL INSTRUCTION	NS	en de la grande de la composition de la grande	
Federal: Who Must File: All issuers	making an offering of s	ecurities in reliance on ar	n exemption under Regulation
D or Section 4(6), 17 CFR			
		•	e of securities in the offering. A (SEC) on the earlier of the
			that address after the date on
which it is due, on the date			

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [:	x] Beneficial Owner	[] Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last nam Prudential Capital Pa		al)					
Business or Residence Two Prudential Plaza				de)			
Check Box(es) that Apply:] Promoter [x] Beneficial Owner	[x] Executive Officer	[x]	Director		General and/o Managing Partner
Full Name (Last nam Kevin R. McDonnell	e first, if individu	al)					
Business or Residence 4180 Thunderbird La			, City, State, Zip Co	de)	1.5.	•	19 87 3 3 18 25 3 15 15 15
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[x]	Director	[]	General and/or Managing Partner
Full Name (Last nam Charles W. Schnatter		al)					
Business or Residence 2002 Papa John's Bl			, City, State, Zip Co	de)			
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[×]	Director	[]	General and/o Managing Partner
Full Name (Last nam Jos P. Stalenhoef	e first, if individu	al)					2. 2. 4.
Business or Resident 3130 Wasson Rd., C			, City, State, Zip Co	de)			
Check Box(es) that Apply:	[]`Promoter [] Beneficial Owner	[] Executive Officer	[x]	Director	[]	General and/or Managing Partner
Full Name (Last nam Scott von Fischer	e first, if individu	al)					
Business or Residen	ce Address (Nur	mber and Street	, City, State, Zip Co	de)	'''''' 		
Two Prudential Plaza	ı, Suite 5600, 18	0 N. Stetson St	., Chicago IL 60601				

Check Box(es) that [] Promoter [] Beneficial Apply: Owner	[] Executive Officer	[x] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Allen A. Weaver			. • :
Business or Residence Address (Number and Strator Two Prudential Plaza, Suite 5600, 180 N. Stetson			
Check Box(es) that [] Promoter [] Beneficial Apply: Owner	[x] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Jeffry W. Shelton			
Business or Residence Address (Number and Street 4180 Thunderbird Lane, Fairfield, OH 45014	eet, City, State, Zip Co	ode)	
Check Box(es) that [] Promoter [] Beneficial Apply: Owner	[x] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Thomas L. Allen			
Business or Residence Address (Number and Street 4180 Thunderbird Lane, Fairfield, OH 45014	eet, City, State, Zip Co	ode)	
Check Box(es) that [] Promoter [] Beneficial Apply: Owner	[x] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Phillip M. Lewis, Jr.			
Business or Residence Address (Number and Str. 4180 Thunderbird Lane, Fairfield, OH 45014	eet, City, State, Zip Co	ode)	e Broodsty Afrika
Check Box(es) that [] Promoter [] Beneficial Apply:	[x] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Deborah L. Chitwood			
Business or Residence Address (Number and Str 4180 Thunderbird Lane, Fairfield, OH 45014	eet, City, State, Zip Co	ode)	

Check Apply:	Box(es)	that	[] Promo	oter []	Benefic Owner	ial	[x] Exe	ecutive icer	[][rirector []	Gener Mana Partne	ging
	ame (Las s L. Harr		first, if in	dividua	ıl)							
			e Addres ne, Fairfie			Street, (City, Stat	e, Zip Co	de)			
	(Use	blank	sheet, or	сору	and use	additio	nal copi	es of thi	s sheet,	as neces	sary.)	
				B. IN	FORMA	TION AI	воит о	FFERING	3			
	the issu	er sold	, or does	the issi	uer inten	d to sell	, to non-	accredite	d investo	ors in this		Yes No
			Answe	er also	in Appen	idix, Col	umn 2, if	filing un	der ULO	E.		
2. Wha	at is the r	ninimu	m investr	nent tha	at will be	accepte	ed from a	any indivi	dual?			\$ <u>NA</u>
3. Does the offering permit joint ownership of a single unit?						Yes No						
or india with sa broker or dea	rectly, an ales of se or deale ler. If mo	y comrecurities r register re than	mission o s in the o tered with	r simila ffering. I the SE persons	r remune If a pers EC and/o to be lis	eration foon to be rewith a steed are	or solicita listed is state or associat	ation of p an assoc states, lis ed perso	urchaser ciated pe at the nar	or given, or sin conners or age of the left to a broke	ection gent of a proker	a
Full Na None	ame (Las	t name	e first, if ir	ıdividua	al)						-	
Busine	ess or Re	sidenc	e Addres	s (Num	ber and	Street, (City, Stat	e, Zip Co	ode)			
Name	of Assoc	iated E	Broker or	Dealer								
States	in Which	n Perso	on Listed	Has So	licited or	Intends	to Solic	it Purcha	sers			
(Chec	k "All S	tates"	or check	indivi	dual Sta	ates)	•••••	••		[]	All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ame (Las	t name	e first, if in	dividua	al)							
Busine	ess or Re	sidenc	e Addres	s (Num	ber and	Street (City Stat	e Zin Co	ide)			

Name	of	Associat	ted B	roker	or De	aler
Name	O1	M33UUIA!	נכיט ט	1000	U D	aic.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States) [] All States									ates			
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	.[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)									[] All St	ates	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ <u>11,000,000</u>	\$ <u>11,000,000</u>
Equity	\$ <u>5,131,200</u>	\$ <u>5,131,200</u>
[x]Common []Preferred		
Convertible Securities (including warrants)	\$ <u>None</u>	\$ <u>-0-</u>
Partnership Interests	\$ None	\$0
Other (Specify).	\$ None	\$ <u>-0-</u>
Total	\$ <u>16,131,200</u>	\$ <u>16,131,200</u>

Answer also in Appendix, Column 3, if filing under ULOE.

amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	10	\$ <u>16,131,200</u>
Non-accredited Investors	0	\$ <u>-0-</u>
Total (for filings under Rule 504 only)	·	\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the	,	
information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
A CONTRACTOR OF THE CONTRACTOR		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505	NA	\$
Regulation A	NA	\$
Rule 504	NA	\$
Total	NA	\$
	•	
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$
Printing and Engraving Costs		\$
Legal Fees	-	\$ <u>355,000</u>
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify) <u>Filing fees, Due Diligence Costs, Lender t</u> Total		\$620,000 \$975,000
b. Enter the difference between the aggregate offering price given in resp	oonse to Part	\$ <u>15,156,200</u>

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar

- C Question 1 and total expenses furnished in response to Part C Question 4.a. This difference is the "adjusted gross proceeds to the issuer."
- 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C Question 4.b above.

	Officers, Directors, &	Payments To
	Affiliates	Others
Salaries and fees	[] \$	[] \$
Purchase of real estate	[] \$	[] \$
Purchase, rental or leasing and installation of machinery and equipment	[]	[]
	\$	\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]	[]
Repayment of indebtedness	[] \$	[] \$
Working capital	[] \$	[] \$
Other (specify): Repurchase common stock	[x] \$ <u>15,156,200</u>	[] \$
	[] \$	[] \$
Column Totals	[x] \$ <u>15,156,200</u>	[] \$
Total Payments Listed (column totals added)	[x] \$ <u>15</u>	,156,200

Payments to

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Skyline Chili, Inc.	1/0009 1/2000	11/11/05
Name of Signer (Print or Type)	Title of Signer (Brint or Type) Secretary	
Mark J. Zummo		

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18
U.S.C. 1001.)

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

Yes No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
- The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)		Date 11/11/05
Skyline Chili, Inc. Name of Signer (Print or Type)	Title (Print of Type) Secretary	
Mark J. Zummo		

APPENDIX

1	Intend to no accrecinvesto Star (Part B-I	to sell on- dited ors in te	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	*estimated	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL					10.00				
AK			-						
AZ	et communitie ou est and a vill								
AR						A SOUTH COMMENTS OF THE STATE O			
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со									
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IL.	Anger Comment and Comment	x	\$11 million sub notes, \$3,472,725 common shares					en general en	x
IN									
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KS	general de la companya de la company						J		
ΚY		x	\$92,600 common shares						x

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NC								
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