

Form **990**

Amended
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)

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

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning

2010 Ending

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

**CASI - Chili Appreciation Society
International Inc
PO Box 307
Bellaire, TX 77402-0307**

RECEIVED

**TPR BRANCH
OGDEN**

D Employer Identification Number

74-2330479

E Telephone number

(832) 567-5558

G Gross receipts \$ 362,009.

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☒ No

If 'No,' attach a list. (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: **www.chili.org**

H(c) Group exemption number

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: **1983**

M State of legal domicile: **TX**

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Our mission is to promote chili and raise money for charity. CASI sanctions over 500 cookoffs a year at which over \$1,000,000 is raised for charities. We host an annual championship for qualifying cooks, award scholarships and provide grants to the local community.

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) **3** **11**

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** **9**

5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) **5** **0**

6 Total number of volunteers (estimate if necessary) **6** **500**

7a Total unrelated business revenue from Part VIII, column (A), line 1 **7a** **0.**

b Net unrelated business taxable income from Form 990-T, line 34 **7b** **0.**

Activities & Governance

Revenue

Expenses

Net Assets or Fund Balances

8 Contributions and grants (Part VIII, line 1h) **8** **124,716.** **130,338.**

9 Program service revenue (Part VIII, line 2g) **9** **103,607.** **104,640.**

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) **10** **2,456.** **2,086.**

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) **11** **-21,015.** **-685.**

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) **12** **209,764.** **236,379.**

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) **13** **33,000.** **60,500.**

14 Benefits paid to or for members (Part IX, column (A), line 4) **14**

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) **15**

16a Professional fundraising fees (Part IX, column (A), line 11e) **16a**

b Total fundraising expenses (Part IX, column (D), line 25) **b** **95,661.**

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) **17** **144,486.** **164,577.**

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) **18** **177,486.** **225,077.**

19 Revenue less expenses. Subtract line 18 from line 12 **19** **32,278.** **11,302.**

20 Total assets (Part X, line 16) **20** **486,350.** **497,652.**

21 Total liabilities (Part X, line 26) **21** **0.** **0.**

22 Net assets or fund balances. Subtract line 21 from line 20 **22** **486,350.** **497,652.**

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FEB 25 2014
OGDEN, UT
IRS-OSC

Part II 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.

Sign Here

Signature of officer

Date

Ed Blair

9-7-13
President

Type or print name and title.

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if

PTIN

Self-Prepared

self-employed

Firm's name

Firm's address

Firm's EIN

Phone no.

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ No

BAA For Paperwork Reduction Act Notice, see the separate Instructions.

TEEA0113L 12/21/10

Form 990 (2010)

617 9 1 of 44

NO STATUTE ISSUE
3 MAR 13 '14

SCANNED MAR 18 2014

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III. ☒ X

1 Briefly describe the organization's mission:

CASI Chili Appreciation Society International, Inc.'s mission is to promote chili and
raise money for charity.2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 42,678. including grants of \$ 41,500.) (Revenue \$ 29,781.)See Schedule O4b (Code:) (Expenses \$ 37,171. including grants of \$) (Revenue \$ 56,646.)See Schedule O4c (Code:) (Expenses \$ 19,373. including grants of \$) (Revenue \$ 2,630.)See Schedule O4d Other program services. (Describe in Schedule O.) See Schedule O(Expenses \$ 16,735. including grants of \$) (Revenue \$ 15,583.)4e Total program service expenses 115,957.

Part IV Checklist of Required Schedules

	Yes	No
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 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2 X	
3 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	X
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	X
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? If 'Yes,' complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian 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	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	X
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.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11a X	
b 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	X
c 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	11c	X
d 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	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11e	X
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	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	X
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, XII, and XIII is optional.	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16	X
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	X
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 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	X
20 a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	X
b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	X	
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? If 'Yes,' complete Schedule J.		X
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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25.		X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
	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?		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I.		X
	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.		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II.		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.		X
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):		
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.		X
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.		X
	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? If 'Yes,' complete Schedule L, Part IV.		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.		X
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.		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
	a 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.		X
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.		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

BAA

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 3		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a 0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.	3b		
4a 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)?	4a		X
b If 'Yes,' enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
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		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 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		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c Enter the amount of reserves on hand.	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	14b		

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response to any question in this Part VI. ☒ **X****Section 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. 1a <u>11</u>		
b Enter the number of voting members included in line 1a, above, who are independent 1b <u>9</u>		
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? See Schedule O.	2 <input checked="" type="checkbox"/> X	
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	<input checked="" type="checkbox"/> X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<input checked="" type="checkbox"/> X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<input checked="" type="checkbox"/> X
6 Does the organization have members or stockholders? ... See Schedule O.	6 <input checked="" type="checkbox"/> X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? See Schedule O.	7a <input checked="" type="checkbox"/> X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	<input checked="" type="checkbox"/> X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a <input checked="" type="checkbox"/> X	
b Each committee with authority to act on behalf of the governing body?	8b <input checked="" type="checkbox"/> X	
9 Is there any officer, director or 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. See Schedule O.	9 <input checked="" type="checkbox"/> X	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a <input checked="" type="checkbox"/> X	
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b <input checked="" type="checkbox"/> X	
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a <input checked="" type="checkbox"/> X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O		
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13.	12a	<input checked="" type="checkbox"/> X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done.	12c	
13 Does the organization have a written whistleblower policy?	13	<input checked="" type="checkbox"/> X
14 Does the organization have a written document retention and destruction policy?	14	<input checked="" type="checkbox"/> X
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?		
a The organization's CEO, Executive Director, or top management official.	15a	<input checked="" type="checkbox"/> X
b Other officers of key employees of the organization.	15b	<input checked="" type="checkbox"/> X
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	<input checked="" type="checkbox"/> X
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ None

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

▶ Ed Blair PO Box 307 Bellaire TX 77402-0307 (832) 567-5558

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII. ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <u>David Sexton</u> Treasurer & Dir	16	X		X				0.	0.	0.
(2) <u>Renee Moore</u> President & Dir	16	X		X				0.	0.	0.
(3) <u>Ed Blair</u> VP & Dir	8	X		X				0.	0.	0.
(4) <u>Tim Collier exp 9/2010</u> Vice Pres & Dir	16	X		X				0.	0.	0.
(5) <u>Dana Plocheck</u> Director	16	X						0.	0.	0.
(6) <u>John Goforth</u> Director	16	X						0.	0.	0.
(7) <u>Robert Schrade</u> Director	8	X						0.	0.	0.
(8) <u>Darin Jester</u> Director	16	X						0.	0.	0.
(9) <u>Jenny Windsor</u> Director	16	X						0.	0.	0.
(10) <u>Dorathy Williams</u> Director	16	X						0.	0.	0.
(11) <u>Bo Prewitt exp 9/2010</u> Director	16	X						0.	0.	0.
(12) <u>Roger Foltz</u> Secy & Dir	16	X		X				0.	0.	0.
(13) <u>Janice Miller</u> Exec Director	24	X		X				0.	0.	0.
(14) _____										
(15) _____										
(16) _____										
(17) _____										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										
(26) -----										
(27) -----										
(28) -----										
(29) -----										
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual.

	Yes	No
3		X
4		X
5		X

4 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 individual.

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

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a				
	b Membership dues	1b	19,773.			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	110,565.			
	g Noncash contributions included in lns 1a-1f: \$		80,900.			
h Total. Add lines 1a-1f			130,338.			
PROGRAM SERVICE REVENUE	Business Code					
	2a Other Programs		56,646.	56,646.		
	b Scholarship Program		29,781.	29,781.		
	c Cookoff & Other Insurance		15,583.	15,583.		
	d Monthly Newspaper		2,630.	2,630.		
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		104,640.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		2,086.	2,086.		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory					
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including: \$ _____ of contributions reported on line 1c). See Part IV, line 18		a	124,945.		
	b Less: direct expenses		b	125,630.		
	c Net income or (loss) from fundraising events			-685.	-685.	
	9a Gross income from gaming activities. See Part IV, line 19		a			
	b Less: direct expenses		b			
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances		a				
b Less: cost of goods sold		b				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions			236,379.	106,041.	0.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	19,000.	19,000.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	41,500.	41,500.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	6,999.		6,999.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	11,782.	10,000.	1,782.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	7,627.			7,627.
23 Insurance	16,735.	16,735.		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a In-kind expenses	80,900.			80,900.
b Printing and Publications	21,432.	21,303.	129.	
c Ranch electricity	3,065.			3,065.
d Postage and Shipping	2,635.	2,355.	280.	
e Miscellaneous	2,439.		2,439.	
f All other expenses	10,963.	5,064.	1,830.	4,069.
25 Total functional expenses. Add lines 1 through 24f.	225,077.	115,957.	13,459.	95,661.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

BAA

Form 990 (2010)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash -- non-interest-bearing.....	82,345.	1	82,952.
	2 Savings and temporary cash investments.....	182,553.	2	187,210.
	3 Pledges and grants receivable, net.....		3	
	4 Accounts receivable, net.....		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.....		5	
	6 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).....		6	
	7 Notes and loans receivable, net.....		7	
	8 Inventories for sale or use.....		8	
	9 Prepaid expenses and deferred charges.....		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.....	10a 286,000.		
	b Less: accumulated depreciation.....	10b 63,880.	216,082.	10c 222,120.
	11 Investments -- publicly traded securities.....		11	
	12 Investments -- other securities. See Part IV, line 11.....		12	
	13 Investments -- program-related. See Part IV, line 11.....		13	
	14 Intangible assets.....		14	
	15 Other assets. See Part IV, line 11.....	5,370.	15	5,370.
16 Total assets. Add lines 1 through 15 (must equal line 34).....	486,350.	16	497,652.	
LIABILITIES	17 Accounts payable and accrued expenses.....		17	
	18 Grants payable.....		18	
	19 Deferred revenue.....		19	
	20 Tax-exempt bond liabilities.....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.....		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.....		22	
	23 Secured mortgages and notes payable to unrelated third parties.....		23	
	24 Unsecured notes and loans payable to unrelated third parties.....		24	
	25 Other liabilities. Complete Part X of Schedule D.....		25	
	26 Total liabilities. Add lines 17 through 25.....	0.	26	0.
UNRESTRICTED OR RESTRICTED NET ASSETS OR FUNDS	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets.....	270,424.	27	283,419.
	28 Temporarily restricted net assets.....		28	
	29 Permanently restricted net assets.....	215,926.	29	214,233.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds.....		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund.....		31	
	32 Retained earnings, endowment, accumulated income, or other funds.....		32	
	33 Total net assets or fund balances.	486,350.	33	497,652.
	34 Total liabilities and net assets/fund balances.	486,350.	34	497,652.

BAA

Form 990 (2010)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI. ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	236,379.
2	Total expenses (must equal Part IX, column (A), line 25)	2	225,077.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,302.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	486,350.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	497,652.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII. ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
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.		

BAA

Form 990 (2010)

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.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization **CASI - Chili Appreciation Society
International Inc**

Employer identification number
74-2330479

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ 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: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☒ An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a ☐ Type I
 - b ☐ Type II
 - c ☐ Type III – Functionally integrated
 - d ☐ Type III – Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants'.)...						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						
4 Total. Add lines 1 through 3.						
5 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) ...						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4.						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10.						
12 Gross receipts from related activities, etc (see instructions).					12	
13 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) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)).....	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14.	15	%
16a 33-1/3% support test – 2010. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 33-1/3% support test – 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2010. 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. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2009. 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. ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ <input type="checkbox"/>		

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)	61,991.	52,037.	52,160.	73,216.	49,438.	288,842.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.....	104,729.	100,123.	100,894.	106,012.	124,945.	536,703.
3 Gross receipts from activities that are not an 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.
5 The value of services or facilities furnished by a governmental unit to the organization without charge....						0.
6 Total. Add lines 1 through 5. . .	166,720.	152,160.	153,054.	179,228.	174,383.	825,545.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b.	0.	0.	0.	0.	0.	0.
8 Public support (Subtract line 7c from line 6.)						825,545.

Section B. Total Support

Calendar year (or fiscal yr beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6.	166,720.	152,160.	153,054.	179,228.	174,383.	825,545.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,582.	7,907.	5,318.	2,456.	2,086.	24,349.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. .						0.
c Add lines 10a and 10b.	6,582.	7,907.	5,318.	2,456.	2,086.	24,349.
11 Net income from unrelated business activities not included in line 10b, 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 (Explain in Part IV.)						0.
13 Total support. (Add line 9, 10c, 11, and 12)	173,302.	160,067.	158,372.	181,684.	176,469.	849,894.

14 **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) organization, check this box and **stop here****Section C. Computation of Public Support Percentage**

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)).....	15	97.1 %
16 Public support percentage from 2009 Schedule A, Part III, line 15.	16	96.9 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)).....	17	2.9 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	3.1 %

19a **33-1/3% support tests – 2010.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization..... ▶ ☒b **33-1/3% support tests – 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see 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. Also complete this part for any additional information. (See instructions).

This image shows a full page of handwriting practice paper. It features multiple sets of horizontal dashed lines spaced evenly down the page, providing a guide for letter height and placement. The background is white, and the lines are black. There is no text or other markings on the page.

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010**Open to Public
Inspection**

Name of the organization

Employer identification number

CASI - Chili Appreciation Society
International Inc

74-2330479

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if
the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$

(ii) Assets included in Form 990, Part X

▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

▶ \$

b Assets included in Form 990, Part X

▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment %
 b Permanent endowment %
 c Term endowment %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		110,615.		110,615.
b Buildings		159,814.	52,423.	107,391.
c Leasehold improvements				
d Equipment		6,854.	6,854.	0.
e Other		8,717.	4,603.	4,114.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				222,120.

BAA

Schedule D (Form 990) 2010

Part VII Investments—Other Securities. See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) ▶		

Part VIII Investments—Program Related. (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶		

Part IX Other Assets. (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.) ▶	

Part X Other Liabilities. (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XIV	Supplemental Information (continued)
----------	--------------------------------------

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Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization **CASI - Chili Appreciation Society
International Inc**

Employer Identification number
74-2330479

Part I

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

- a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a 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

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 \$5,000¹ by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

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

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1 <u>Terlingua Int'</u> (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add column (a) through column (c))
	REVENUE			
1 Gross receipts	124,945.			124,945.
2 Less: Charitable contributions				
3 Gross income (line 1 minus line 2)	124,945.			124,945.
DIRECT EXPENSES				
4 Cash prizes	10,000.			10,000.
5 Noncash prizes	4,800.			4,800.
6 Rent/facility costs				
7 Food and beverages				
8 Entertainment				
9 Other direct expenses	110,830.			110,830.
10 Direct expense summary. Add lines 4 through 9 in column (d)				125,630.
11 Net income summary. Combine line 3, column (d), and line 10.				-685.

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.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
REVENUE				
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? ☐ Yes ☐ No

b If 'No,' explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If 'Yes,' explain: _____

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

CASI - Chili Appreciation Society

Employer identification number

74-2330479

Part I General information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.

Part II can be duplicated if additional space is needed. ▶

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Terlingua EMS & VFD P O Box 290 Terlingua, TX 79852			8,000.	0.			Assist EMS & VFD in local area
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

2 Enter total number of section 501(c)(3) and government organizations **1**

3 Enter total number of other organizations **0**

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901L 10/29/10

Schedule I (Form 990) 2010

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered 'Yes'**
on Form 990, Part IV, lines 29 or 30.
► **Attach to Form 990.**

OMB No. 1545-0047

2010

**Open To Public
Inspection**

Name of the organization **CASI - Chili Appreciation Society
International Inc**

Employer identification number
74-2330479

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests...				
12 Securities—Miscellaneous				
13 Qualified conservation contribution— Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	9	54,500.	
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (Trophies, Misc	X	14	16,400.	
26 Other ► (Computer Supprt	X	1	10,000.	
27 Other ► (.....)				
28 Other ► (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?.....

Yes No

30a		X
-----	--	---

b If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?....

31

X

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?.....

32a

X

b If 'Yes,' describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2010

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

Name of the organization **CASI - Chili Appreciation Society
International Inc**

Employer identification number
74-2330479

Form 990, Part III, Line 4a - Program Service Accomplishments

CASI grants of scholarships on a national basis. Currently providing \$1,000 per year
scholarships to approximately 30 students

At the first board meeting of each fiscal year, the board authorizes the number of
scholarships to be granted for the current year. This includes one scholarship for
the Valedictorian of the Terlingua High School, and a specified number of additional
scholarships that can be applied for by any high school graduating student. The
application form is posted on the CASI web site. Applicants must fill out the
application and mail it to the scholarship committee chairman. The applications are
distributed to all of the committee members, who review them individually, and then
rank them in the order in which they believe the scholarships should be granted. The
committee chairman then tabulates the results from the committee members and
announces the winners.

Of note, the amounts disbursed in 2009 is far less than prior years, because the
payments that normally would have been disbursed in December 2009 were paid in
January 2010. Thus 2010 will be much higher. The reason for this timing was that we
were waiting on the students to provide transcripts after the Fall 2009 semester
under a new policy implemented for accountability by the students. We determined the
timing is just too tight for the Fall semester, so now require the students to comply
right after the Spring semester, such reporting to include the Fall semester as well.

Form 990, Part III, Line 4b - Program Service Accomplishments

Other programs:

CASI makes Grants to local school, charitable and governmental organizations in the

Name of the organization **CASI - Chili Appreciation Society
International Inc**

Employer identification number
74-2330479

Form 990, Part III, Line 4b - Program Service Accomplishments

area of the cookoff as the area is a low income community. \$19,000

CASI sanctioned a chili cookoff in Baghdad for some of the US troops. Costs \$1,016

CASI has an annual business meeting of which a \$1 fee is assessed each cook to help underwrite the cost. Host Pods are allowed up to \$10,000 towards the cost of the meeting. For 2010, the host Pod requested the full \$10,000 of the allowable \$10,000 limit. Other costs of putting on the meeting including printing of materials in the amount of \$807.

Form 990, Part III, Line 4c - Program Service Accomplishments

CASI publishes and mails to its members a monthly newspaper that informs our members of our upcoming cookoffs, cookoff results, and other happenings in the chili world.

It is also distributed at cookoffs to nonmember contestants, judges and spectators as way to introduce them to additional chili cooking activities and see the charitable tally of funds raised.

The October edition is larger as it is in the month just ahead of the chili championship event held at CASI's property in West Texas as it includes information on the cookoff and the surrounding areas.

The paper is funded through the dues of the membership as well as a minimal amount of advertising revenue, being \$2,630 in 2010.

Form 990, Part III, Line 4d - Other Program Services Description

CASI has obtained liability insurance covering sanctioned cookoffs for which it assesses a \$1 per cook fee to be used to pay the premiums.

Name of the organization **CASI - Chili Appreciation Society
International Inc**

Employer identification number
74-2330479

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

President Renee Moore is the daughter-in-law of the Treasurer Ed Blair.

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

The Organization has annual member, life members and corporate members. Each member has the same rights and privileges subject to keeping their dues current for the non-life members.

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

Individual members have a voice in voting to elect the governing body by being a member of an Affiliated Pod, which is our name for a chapter. Through such membership, they can vote for officers in such Pod to represent that Pod at the annual business meeting.

Pods in good standing are all permitted to vote at the annual business meeting, called the Great Peppers Meeting named for the presidents of the chapters whom are called Great Peppers. At the Great Peppers Meeting, 4 new Directors are elected by secret written ballot. The two candidates receiving the most votes serve for 3 year terms. The two remaining candidates that win serve for 2 year terms. An Executive Director is elected in a separate race every other year to serve a two year term.

Form 990, Part VI, Line 9 - Officer, Director, Trustee, Key Employee Mailing Address

The addresses of the Directors have been provided elsewhere, because the Organization maintains no office at the property we own. The physical address of our property is: 80 Mariposa Mine Rd Terlingua, TX

Form 990, Part VI, Line 11b - Form 990 Review Process

Return is submitted to Board of Directors for comment prior to filing.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

By-laws are posted on the website for the members and the public to see.

Name of the organization **CASI - Chili Appreciation Society
International Inc**

Employer identification number
74-2330479

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available (continued)

Financial statements are posted on the website for members to see.

Policies are recorded in the Board of Directors Meeting minutes which are posted on
the website for members to see and also distributed to the members via the president
of the local affiliate chapters.

9/07/13

06:03AM

Inventory of Goods for Sale

The Organization purchases clothing and small products that it offers for sale at our annual fundraiser. Each item carries our Trademark. The bulk of the items for sale are sold during the event. During the year, any unsold items are available for purchase. At this time, the sales not occurring at the fundraiser represent perhaps 2% of the total revenues generated from this activity. It is not an activity regularly carried on. Historically, the revenues generated have been included in the fundraiser revenue as are the purchases.

For 2010, the revenues from these items totaled: \$29,019

For 2010, the purchases of these items totaled: \$22,612

No opening or closing inventory was considered.

Terlingua International Chili Championship

This is our annual chili championship that is the culmination of the year's competitions. Earning the points to qualify to cook at this event can only be done at cookoffs that are sanctioned by CASI. We have it listed as our fundraising event, because without it, we would not have a high enough profile to secure our national sponsors and to have our regular chili cookoffs so well attended. While the tax return shows this event to lose money, that is in part because some of the events held during the event have their revenue dedicated solely to for our Scholarship Program. \$14,177 were raised in 2010 and are immediately deemed in the Scholarship Program Fund Balance. In addition, to fund the cash prizes awarded at this event, sponsors were sought and have agreed to underwrite all cash prizes and most non-cash prizes as well. Cash prizes are awarded only for events dedicated to fundraising for the Scholarship Fund, which is why our sponsors so willing provide the funds. The winners of our chili event do not receive any cash prizes, but instead receive non-cash items that are consistent with cooking chili.

As for our regular sanctioned cookoffs, the net proceeds of each are dedicated to local charities of each particular cookoff's promoter. In recent years, the net proceeds from these cookoffs have been donated to various charities in excess of \$1,000,000 annually. These funds are not included in the CASI return, as we are simply a sanctioning body and do not control them. We do have rules under which the cookoff must operate in order for it to qualify its winners to earn the points toward the annual championship.

Form 990, Part VIII - Activities Relationships**Relationship of Activities/Accomplishment of Exempt Purposes**

Section 93 (a - f) - All of the money received through these sources of income allow CASI to operate a corporation with the primary objective of raising money through the promotion of chili. Chili cooks cook at cookoffs throughout the competition year (October 1 thru September 30) earning points which could result in qualifying to cook at our annual championship held the first weekend in November. CASI is responsible for the sanctioning of cookoffs, keeping track of cookoff results and qualifying points, publishing a monthly newspaper for our members, annually providing our members with rule books, providing for an annual convention of local area chili clubs (pods), paying for and maintaining the 320 acres of land that the annual championship is held on in November, putting on the annual championship which usually attracts in excess of 5,000 people, and contributing money to worthy causes in the south Brewster County area, and throughout the United States.

9/07/13

06:03AM

Statement of Internal Financing

The Life Membership Reserve Fund was established to provide for the annual costs of our Life Members which number 502 as of December 31, 2010. It was determined that the fund needed to be increased from \$60,000 to \$100,000 to support this number of life members and the costs associated with their membership. The Fund also acts as an emergency working capital reserve.

The CASI Scholarship Fund was established to provide college scholarships for deserving graduating high school students across the United States. Since we are a national organization, this is our first effort to contribute money outside of the Brewster County Texas area. All moneys received by this fund may only be spent on scholarships and can be disbursed in no other way or fashion. This fund is financed via internal money surpluses, a fund raising event held on the Friday of our annual championship, and by outside contributions.

The CASI Cookoff Liability Insurance Fund was established in 2002 to provide liability insurance for all CASI sanctioned cookoffs. CASI has purchased a blanket insurance policy and the payment of associated premiums are funded by assessing each cook \$1.00, which is part of the cookoff entry fee. Surplus funds may be distributed at the discursion of the CASI Board of Directors. This fund was established by a vote of the Great Peppers at our 2002 convention.

At the Great Peppers meeting in 1994, the delegates approved the creation of the Great Pepper's Meeting Fund. This fund was established to help finance the annual Great Pepper's Meeting. The fund would be funded by a \$1.00 assessment from each chili cook entry fee. The fund would finance up to 75% of the total meeting budget, not to exceed \$8,500.00. In 2004, the delegates increased the maximum subsidy to \$10,000.00. The fund can accumulate a maximum balance of \$10,000.00, after which, all excess funds will be transferred to the General Fund.

Other Points of Interest

- (1) CASI is a 501(c)(3) Corporation.
- (2) CASI has no paid employees or officers.
- (3) In 1997, CASI paid for the construction of the school's basketball court
- (4) In 2000, CASI wrote a check in the amount of \$5,000.00, to assist four Terlingua High School graduates who at the very last minute lost their federal grants, to attend trade school to become diesel mechanics.
- (5) CASI gives each Terlingua High School Valedictorian a four year, \$1,000.00 per year, scholarship.
- (6) The CASI National Scholarship Program was established in 2000. This program was set up to grant four year, \$1,000.00 per year scholarships, to students outside of the Terlingua area. In 2008, the program was expanded to include scholarships to students attending vocational schools for two years, \$1,000 per year.
- (7) CASI now has many active scholarships in progress, and will award nine 4-year college, 1 partial college (one year), and three 2-year trade school scholarships in May of 2010.
- (8) All of CASI's profits go to charity.
- (9) We are making a difference through chili!

2010

Federal Supporting Detail

Page 1

CASI - Chili Appreciation Society
International Inc

74-2330479

9/07/13

06:03AM

**Miscellaneous
Number of volunteers**

Estimate of volunteers.....	Total	\$	500.
		\$	<u>500.</u>

**Contributions, Gifts, and Grants
Membership dues and assessments**

Annual Membership Dues.....	\$	13,648.
Corporate Membership Dues		4,100.
Life Membership Dues.....		2,025.
Total	\$	<u>19,773.</u>

**Contributions, Gifts, and Grants
Other contributions, gifts, grants, etc.**

Sponsorship - net of amounts to TICC Underwriting.....	\$	29,665.
Total	\$	<u>29,665.</u>

Code Note

Scholarships paid.....	Total	\$	41,500.
		\$	<u>41,500.</u>

Code Note

Grants to local community organizations.....	\$	19,000.
Rules and Sanctioning services.....		3,431.
GPM - Annual Business Meeting.....		10,807.
Transfer from Gen to Scholarship.....		0.
Membership services.....		1,956.
TallyMaster.....		962.
Baghdad Cookoff expenses.....		1,016.
Rounding.....		-1.
Total	\$	<u>37,171.</u>

2010

Federal Worksheets
CASI - Chilli Appreciation Society
International Inc

Page 1

74-2330479

9/07/13

06:35AM

Form 990, Part IX, Line 24f
Other Expenses

	(A) <u>Total</u>	(B) <u>Program Services</u>	(C) <u>Management & General</u>	(D) <u>Fundraising</u>
Bank Charges	807.		807.	
Membership Plaques	665.	665.		
Other Expenses	740.	740.		
Property taxes	1,555.			1,555.
Publicity Expenses	1,023.		1,023.	
Ranch maintenance	962.			962.
Scholarship admin costs	1,178.	1,178.		
Special Event - Baghdad CCO	1,016.	1,016.		
Sponsor related exp	631.			631.
Supplies	478.	478.		
Telephone	1,908.	987.		921.
Total	<u>\$ 10,963.</u>	<u>\$ 5,064.</u>	<u>\$ 1,830.</u>	<u>\$ 4,069.</u>

12/31/10

2010 Federal Book Depreciation Schedule CASI - Chili Appreciation Society International Inc

Page 1

74-2330479

9/07/13

06:35AM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Dep. Allow	Prior 179/ Bonus/ Sp. Dep.	Prior Dec. Bal. Dep.	Salvage /Basis Reductn	Dep. Basis	Prior Dep.	Method	Lifa	Rate	Current Dep.	
Form 990/990-PF																	
Buildings																	
2	Buildings	12/31/90		36,860							36,860	22,400	S/L	31.5		1,170	
3	Buildings	12/31/97		11,500							11,500	4,380	S/L	31.5		365	
4	Buildings	12/31/98		10,000							10,000	3,487	S/L	31.5		317	
5	Buildings	12/31/00		40,000							40,000	11,430	S/L	31.5		1,270	
6	Buildings	12/31/04		15,679							15,679	2,490	S/L	31.5		498	
7	Buildings	12/31/05		10,979							10,979	1,396	S/L	31.5		349	
8	Buildings	12/31/06		10,159							10,159	969	S/L	31.5		323	
9	Buildings	12/31/07		15,537							15,537	986	S/L	31.5		493	
23	Storage Bldg near stage	8/12/10		7,200							7,200		S/L	MM	39 .00963	69	
24	Roof btwn Judging-Concess	5/12/10		1,100							1,100		S/L	MM	39 .01605	18	
25	Rock wall btwn Judg-Conc	5/06/10		800							800		S/L	MM	39 .01605	13	
Total Buildings				159,814	0	0	0	0	0	0	159,814	47,538					4,885
Land																	
1	Land	12/31/89		39,968							39,968						0
Total Land				39,968	0	0	0	0	0	0	39,968	0					0
Land Development Costs																	
10	Land Dev Costs - Var	12/31/93		14,102							14,102						0
11	Land Dev Costs - 1994	12/31/94		11,878							11,878						0
12	Land Dev Costs - 1995	12/31/95		3,900							3,900						0
13	Land Dev Costs - 1997	12/31/97		11,500							11,500						0

12/31/10

2010 Federal Book Depreciation Schedule

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CASI - Chili Appreciation Society
International Inc

74-2330479

9/07/13

06:35AM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Our 179 Bonus	Special Dep. Allow.	Prior 179/ Bonus/ Sp. Dep.	Prior Dep. Bal.	Salvage /Basis Reduction	Dep. Basis	Prior Dep.	Method	Life	Rate	Current Dep.
14	Land Dev Costs - 1998	12/31/98		11,175							11,175					0
15	Land Dev Costs - 1999	12/31/99		3,527							3,527					0
16	Land Dev Costs - 2000	12/31/00		10,000							10,000					0
21	Land Impr - Main Plaza	5/06/10		2,950							2,950					0
22	Land Impr - 320 Wall	5/06/10		1,615							1,615					0
	Total Land Development Costs			70,647		0	0	0	0	0	70,647	0				0
	Machinery and Equipment															
19	Equipment 1990 - 1992	12/31/92		6,854					6,854		0		200DB	HY	7	0
	Total Machinery and Equipment			6,854		0	0	0	6,854	0	0	0				0
	Miscellaneous															
17	Trailer	12/31/92		1,000					1,000		0		200DB	HY	7	0
18	Sign	12/31/92		500							500	500	200DB	HY	5	0
20	Sign - CASI Inc	11/01/09		7,217							7,217	361	200DB	MQ	5	2,742
	Total Miscellaneous			8,717		0	0	0	1,000	0	7,717	861				2,742
	Total Depreciation			286,000		0	0	0	7,854	0	278,146	48,399				7,627
	Grand Total Depreciation			286,000		0	0	0	7,854	0	278,146	48,399				7,627

Renee Moore – President 214 El Camino River Road Bastrop, TX 78602 251-228-0807	
Ed Blair – Vice President P O Box 307 Bellaire TX 77402-0307 Home: (713) 686-4520 Cell: (832) 567-5558	Darin Jester P O Box 421034 Indianapolis IN 46242 Home: (317) 856-3231 Cell: (317) 319-4961
Roger Foltz - Secretary 5024 Milam St Dallas, TX 75206 214-914-3733	Jenny Windsor - TallyMaster 390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094
David Sexton - Treasurer PO Box 720387 Dallas, TX 75372 Cell: (817)-793-0656	Robert Schrade - Ranch Manager 2231 Silver Mt. San Antonio TX 78264 Cell: (210) 823-3602
Janice Miller – Executive Director 3014 Oak Mountain Trail San Angelo, TX 76904 325-947-8753	John Goforth 103B West Street Comfort, TX 78013 830-832-5070
Dorathy Williams PO BOX 39 Terlingua, TX 79852 432-371-2595	Dana Plocheck 4110 Caravel Court Missouri City, TX 77459 281-208-1926