Form **990**

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)

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

	2011
	Open to Public Inspection
Idon	tification Number
)479
nun	
	567-5558
eipts	
	filiates? Yes X No
ed? ee in	structions) Yes No
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3	11
4	9
5	0
6	500
7a	0.
7b	Current Vacr
8.	Current Year 151,073.
<u>0.</u>	105,733.
6.	1.177
5	224.
9.	258,207.
0.	48,000.
7.	167,933.
7.	215,933.
2.	42,274.
'ear	End of Year
2.	539,926.
O.	0.
2.	539,926.

A	For the	2011 calend	dar year, or tax year beginn	ing 20	11, and endin	na .		·	
		applicable	C	,	i i i and chair	· <u>9</u>	D Employer Ide	entification Numbe	er
_		ress change	CAST - Chili App	reciation Society			74-233		
	—	•	International In				E Telephone n		
	\vdash	ne change	PO Box 307	G			,		
	Initia	al return	Bellaire, TX 774	02-0307			(832)	567-5558	
	Terr	minated							
	Ame	ended return					G Gross receip	ots \$ 3	83,531.
	Арр	lication pending	F Name and address of principa	officer		H(a) Is this a	a group return for	affiliates?	Yes X No
			Same As C Above			1 ''	affiliates included	1 1	Yes No
ī	Tax-ex	empt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1)	or 527	if No,	attach a list (see	instructions)	
1			w.chili.org	, , , , , , , , , , , , , , , , , , , ,		H(c) Group	exemption numbe	. >	
ĸ		of organization	X Corporation Trust	Association Other ►	L Year of Forma		<u> </u>	of legal domicile	TX
	rt I	Summar		Association	L rear or Forma	1001 100	J IN State	or legal domicile	<u> </u>
				on or most significant activities:	Our mice	100 10	+	oto obili	
				on or most significant activities:					
Ş				CASI sanctions over 5					
nar				<u>charities. We host ar</u>					t y 1 <u>ng</u>
Ž.	2 (COOKS, _d	ward scholarships	s_and_provide_grants_t n discontinued_its_operations=or=dis	o The T	o than OE	mmmitte -		
ලි	3 1	dumber of vo	oting members of the govern	ning body (Part VI) line la a)	sposed of mo	re man 25	% of its net a:		11
≪ 5				of the governing body (Part VI)	16-1h)		4		
ţį				calendar year 2011 (Part V, line 2			5		0
Activities & Governance			of volunteers (estimate if r				6		500
Ac				art VIII column (C), line 12	$ \mathcal{S} $		7	a	0.
			business taxable income fi		4		7		0.
				OUDER, OF		P	rior Year	Curren	
	8 0	Contributions	and grants (Part VIII, line	1h)	-		130,338		51,073.
Revenue			rice revenue (Part VIII, line				104,640		05,733.
ē	1		ncome (Part VIII, column (A	-			2,086		$\frac{00,700.}{1,177.}$
غَ	1		· · · · · · · · · · · · · · · · · · ·	es 5, 6d, 8c, 9c, 10c, and 11e)		 	-685		224.
	1			(must equal Part VIII, column (A),	line 12)		236,379		58,207.
			milar amounts paid (Part I)		<u></u>		60,500		48,000.
			to or for members (Part IX			<u> </u>	00,000	·	10,000.
		•		benefits (Part IX, column (A), line	5 10V	}			
g					es 3-10)				
Expenses	16a ⊦	rofessional i	fundraising fees (Part IX, c	olumn (A), line 11e)		<u> </u>			
ĝ	b T	Total fundrais	sing expenses (Part IX, colu	ımn (D), line 25) ►	98,024.	. L			
Ú	17 C	Other expens	es (Part IX, column (A), lin	es 11a-11d, 11f-24e)			164,577	. 1	67,933.
		•		qual Part IX, column (A), line 25)			225,077		15,933.
	Í		expenses Subtract line 18				11,302		42,274.
× 8						Beginnin	g of Current Yea		
t Assets or id Balances	20 T	Total assets ((Part X, line 16)			Dog	497,652		39,926.
8 E			s (Part X, line 26)			-	0		0.
a 5			,	21 from line 20			497,652		39,926.
		,	fund balances, Subtract lin	le 21 from line 20			491,032		39, 320.
	<u>ijt </u>	Signatur							
Úng con	er penalti plete De	ies of perjury, i d claration of prep	declare that I have examined this ret arer (other than officer) is based on	turn, including accompanying schedules and all information of which preparer has any kr	statements, and lowledge	to the best of	my knowledge ar	nd belief, it is true,	correct, and
<u>_e</u>	<u> </u>	6	M				a -		
2:	ب ج	Supatu	ire of officer			Dai	/-	1-13	
Sig	עכ],							
He	re	Fa I	Blair			Presi	.dent		
	id eparei	Type or	print name and title	1			<u> </u>	DTIN	
	E	Print/Type p	oreparer's name	Preparer's signature	Date		Check if	PTIN	
Pa	idē	E.		Self-Prepared			seif-employed	1	<u> </u>
			e •						
Us	e(Onl	Y Firm's addre	255		,		Firm's EIN 🕨		1
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				chrysta structure (sacrate metructure)					No

Statement of Program Service Accomplishments Statement or in Statement or colored as response to any question in the Part III Statement or in Statement or colored as response to any question in the Part III Statement or in Statement or in Statement or III Appreciation Society International, Inc.'s mission is to promote chili and raiss 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 Yes.' testing the permitted or the program services on Schedule O. Yes, describe these new services on Schedule O. Yes, describe these changes on Schedule O. Yes Xes No Yes, describe these changes on Schedule O. Yes, describe these changes on Schedule O. Yes Yes Xes No Yes, describe these changes on Schedule O. Yes, describe the schedule O. Yes Yes Xes No Yes Yes Xes Yes Yes Yes Xes Yes Yes Xes Yes Yes Yes Xes Yes Ye	Form	1990(2011) CASI - Chili Appreciation Society	74-2330479	Page 2
Briefly describe the organizations measion. CASI Chili Appreciation Society International, Inc.'s mission is to promote chili and raise money for charity.	<u>Par</u>	t III Statement of Program Service Accomplishments		
CASI makes Grants to local school, Charitable and governmental organizations in the area of the crockoff as the area is a low income community. \$19,000 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 only \$6,904 of the allowable \$10,000 limit. Other costs of putting on the weeting including grants of \$29,000.) (Revenue \$26,310.) See Schedule 0.		Check if Schedule O contains a response to any question in this Part III		\X
2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27. 1 Yes, 1 Secribs these new services on Schedule O. 3 Did the organization coase conducting, or make significant changes in how it conducts, any program services. We seek the following the organization coase conducting, or make significant changes in how it conducts, any program services. We resolved the following the organization coase conducting, or make significant changes in how it conducts, any program services. We resolved to 19 Yes. 3 Did the organization coase conducting, or make significant changes in how it conducts, any program services. We resolved the coase of the coase of the coase of the services of the coase of the coa	1			
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990 EZ? If Yes, describe these new services on Schedule O. 3 Did the organization cause conducting, or make significant changes in how it conducts, any program services? 4 Pess No. If Yes, describe these changes on Schedule O. 3 Did the organization cause conducting, or make significant changes in how it conducts, any program services? 4 Pess No. If Yes, describe these changes on Schedule O. 4 (Code: (Expenses \$ 35,110. including grants of \$ (Revenue \$ 61,307.) Other programs: CASI makes Grants to local school, charitable and governmental organizations in the area of the cookoff as the area is a low income community. Sl9,000 CASI has an annual business meeting of which a Sl fee is assessed each cook to help underwrite the cost. Host Fods are allowed up to \$10,000 towards the cost of the meeting. For 2010, the host Fod requested only \$6,904 of the allowable \$10,000 limit. Other costs of putting on the meeting including printing of materials in the amount of \$1,434. 4 (Code: (Expenses \$ 29,542. including grants of \$ 29,000.) (Revenue \$ 26,310.) See Schedule O. 4 (Code: (Expenses \$ 16,745. including grants of \$ 29,000.) (Revenue \$ 26,310.) See Schedule O. 4 (Code: (Expenses \$ 15,693. including grants of \$) (Revenue \$ 15,032.)		CASI Chili Appreciation Society International, Inc.'s mission is	to promote o	hili and
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(Expenses \$ 15,693. including grants of \$) (Revenue \$ 15,032.)	40	Other program services. (Describe in Schedule O) See Schedule O		
		4 - 4 - 4	15,03	2.)
	4 e			

			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	Х	
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_		Х
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
ŧ	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	_
t	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	าา๖		Х
•	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	11 d		<u>X</u>
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u>X</u>
	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	11 <i>f</i>	-	_X_
	a 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
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13 14a		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	144		
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		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		<u>X</u>
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		Χ
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	Х	
	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
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u>
i	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

			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	21	_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	22	Х	<u> </u>
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		<u> </u>
24 a	a 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	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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	25a		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	25b		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	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
	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):	28a		X
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b	_	<u>X</u>
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	<i>2</i> 8c		_ <u>X</u> _
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	<u>X</u>	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u> _
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		<u>X</u>
3 3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		_ <u>X</u> _
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	34	-	_X_
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	_35a		_X_
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes' complete Schedule R, Part V, line 2	35b		<u>X</u>
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	36		_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	37		<u>X</u>
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	38	Х	
BAA		Form	990 ((2011)

Form 990 (2011) CASI - Chili Appreciation Society Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	6		
ŧ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	ō		İ
	Did the organization comply with backup withholding rules for reportable payments to vendors		7		
2-	(gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	} }	10	X	
	ments, filed for the calendar year ending with or within the year covered by this return		0		_
1	of at least one is reported on line 2a, did the organization file all required federal employment	tax returns?	2b		<u></u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see ins	structions)		-	١
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year	?	3a		X
t	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, securities account accoun	or other authority over, a nancial account)?	4a		Х
k	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 Fi				
5 <i>a</i>	Nas the organization a party to a prohibited tax shelter transaction at any time during the tax	year ²	5 a		<u>X</u> _
t	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	_5b		X
C	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		_5c		
68	a Does the organization have annual gross receipts that are normally greater than \$100,000, an solicit any contributions that were not tax deductible?	nd did the organization	6a		Х
ŀ	o if 'Yes,' did the organization include with every solicitation an express statement that such co not tax deductible?	ntributions or gifts were	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
8	Did the organization receive a payment in excess of \$75 made partly as a contribution and paservices provided to the payor?	rtly for goods and	7a		Х
t	of Yes, did the organization notify the donor of the value of the goods or services provided?		7 b		
C	: Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh Form 8282?	ich it was required to file	7c		Х
c	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	_	l i	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	7e		_X_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	efit contract?	7 f		_X_
ç	g If the organization received a contribution of qualified intellectual property, did the organization as required?	n file Form 8899	7g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, ha holdings at any time during the year?	organizations. Did the ve excess business	8		l
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a	<u> </u>	
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		
	Section 501(c)(7) organizations. Enter.				_
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
k	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	_		
t	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11ъ			
128	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	orm 1041?	12a	L	
Ŀ	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	\int		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
á	als the organization licensed to issue qualified health plans in more than one state?		13a	<u> </u>	L
	Note. See the instructions for additional information the organization must report on Schedule	e O.			
ł	Enter the amount of reserves the organization is required to maintain by the states in	المدا	}		
	which the organization is licensed to issue qualified health plans	136	-		
	Enter the amount of reserves on hand	13c	-		7.5
	a Did the organization receive any payments for indoor tanning services during the tax year?		74a		X_
	of If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	cnedule O	14b		(00:1:
3AA	TEEA0105L 07/05/11		Forr	n 990	(2011)

Form 990 (2011) CASI - Chili Appreciation Society 74-2330479 Page 6 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 if there are material differences in voting rights among members 1 a 11 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 9 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 0 Х 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х X 6 Did the organization have members or stockholders? See Schedule O 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule 0 7a X b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X 8ь **b** Each committee with authority to act on behalf of the governing body? 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Х 10a Did the organization have local chapters, branches, or affiliates? b It "Yes," did the organization have written policies and procedures governing the activities of such chapters, attiliates, and branches to ensure their Х operations are consistent with the organization's exempt purposes 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule 0 X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c Х 13 13 Did the organization have a written whistleblower policy? Х 14 Did the organization have a written document retention and destruction policy? 14 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 15 a χ 15b **b** Other officers of key employees of the organization 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 X 16a taxable entity during the year? bili 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16**b** Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None 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. |X| Upon request Another's website Own website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to See Schedule O the public during the tax year.

Form 990 (2011)

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

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

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check 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-M(SC) 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.

nor any i	related	d org	janız	zatio	on con	npen	sated any current offi	cer, director, or truste	e
	(C)								
(B) Average hours per week	unles	s per	ck mo son e	ore th s bot	h an offi	box, cer	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
(describe hours for related organiza- trons in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
<u> </u>	\		'		\				
16	X	L.	X	ļ	<u></u>		0.	0.	0.
16	X		X				0.,	0.	0.
8	X		X				0.	0.	0.
16	X		x	İ			0.	0.1	0.
 	<u>*</u>								
16	Х		Х	ŀ			0.	0.	0.
1.0	,						0	0	0.
10	^	H					0.	<u></u>	<u> </u>
8	Х						0.	0.	0.
									•
16_	X	-				-	0.	0.	0.
16	x) {	 	, ,	0.
10		<u> </u>				_	<u> </u>		<u>·</u>
16_	X		<u>.</u>				0.	0.	0.
}	{	[]			{				
16	X						0.	0.	0.
								-	_
16	X		_	 	[0.1	0.	<u>0.</u>
1		Ì	١	1					•
16_	X	\vdash	X	<u> </u>		<u> </u>	0.	<u> </u>	0.
24	X		Х			 	0.	0.	0.
	(B) Average hours per week (describe hours for related organization of the control of the contro	Average hours per week (describe hours for related organizar Schedule O) 16 X (B) Average hours per week (describe hours for related organizations in Schedule O) 16	(B) Average hours per week (describe hours for related organization) Schedule O) 16 X X 17 X X 18 X X X X	(do not check more the unless person is both and a director/ficer related organization of the composition of	Average hours per week (describe hours for related organization) 16	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) or individual thistee of individual thistee of organizations in Schedule O) 16	CC	Comparison Com	

Part VII Section A. Officers, Directors, Trus				npl	oye	es	an	d Highest Co	mpensated Em	ployee	Pag s (con:	<u>t)</u>
(A) Name and title	hours	offic	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	amou	(F) timated nt of other pensation				
	week (describe e hours for related organi- zations in Sch O)		institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/10 99 MISC)	related organizations (W 2/10 99 MISC)	fro Orga an	orn the community of th	
(15)										_ <u>_</u> _		
(16)	1		<u> </u>									_
(18)	1									<u> </u>		
(19)												
(20)										1		_
(21)					'						··	_
(22)												
(23)												
(24)												
(25)					j							
1 b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)							 	0. 0.	0. 0.			0. 0. 0.
 Total number of individuals (including but not limited from the organization 			ted	abo	ve) v	w ho	rece	eived more than \$	100,000 of reportab	le comp	ensation	,
3 Did the organization list any former officer, director	or trust	ее, ¥	кеу с	emp'	ioye	e, oi	r 'nig	inest compensated	i employee			lo
on line 1a ³ If 'Yes,' complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th	ortable	com	npen 02 /i	nsatı f 'Ye	on a	and o	othe lete	r compensation fro Schedule J for	om	3		<u>х</u>
 such individual Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' c 	ompens	ation	n fro	m a	ny u	ınrel	atec	d organization or in	ndıvıdual	5		<u>X</u> v
Section B. Independent Contractors										131		<u>X</u>
1 Complete this table for your five highest compensate compensation from the organization. Report compensation.	ed indeposation	pend for t	ent ne c	cont alen	ract dar	ors i year	that end	ding with or within	the organization's t			
Name and business addres	s	_					_	Description (B)	of services	Comper	nsation	
					_							_
							_					
2 Total number of independent contractors (including l \$100,000 in compensation from the organization ►	out not	lımıt	ed to	o the	ose	liste	d ab	pove) who received	d more than			

Га	t viii Statement of Revenue			· · · · · · · · · · · · · · · · · · ·	
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
9.0	1a Federated campaigns 1a				= 12, 0.0, 0. 0.1
A E	b Membership dues 1b 18,066.				1
a S	c Fundraising events				
A S	· · · · · · · · · · · · · · · · · · ·				
병질	d Related organizations				\
S, S	e Government grants (contributions)			1	
유법	f All other contributions, oifts, grants, and				\
BE	f All other contributions, gifts, grants, and similar amounts not included above 11 133,007.				
20	g Noncash contributions included in Ins Ta-If: \$ 83,000.	1			
중취	h Total. Add lines 1a-1f	151,073.			
<u> </u>	Business Code				
EN	2a Other Programs	61,307.	61,307.	-	
<u>[</u>	b Scholarship Program	26,310.	26,310.		
핑		15,032.			
Ž	c Cookoff & Other Insurance		15,032.		
SE	d Monthly Newspaper	3,084.	3,084.		
₹	e				ļ
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other program service revenue.				
<u></u>	g Total. Add lines 2a-2f ▶	105,733.		!	<u> </u>
]	3 Investment income (including dividends, interest and				
ľ	other similar amounts)	1,177.	1,177.		
]	4 Income from investment of tax-exempt bond proceeds ►				
	5 Royalties				
ļ	(i) Real (ii) Personal				
	6a Gross rents				
)	b Less, rental expenses	}	!)
	c Rental income or (loss)	İ			
ĺ	d Net rental income or (loss)	ļ			
ĺ	(i) Char				
	7a Gross amount from sales of assets other than inventory				
ļ	, , , , , , , , , , , , , , , , , , , ,	}			}
}	b Less cost or other basis		ľ		j
ļ	and sales expenses	ļ		1	ļ
1	c Gain or (loss)				
	d Net gain or (loss)				
NUE	8a Gross income from fundraising events (not including \$				
OTHIER REVEN	of contributions reported on line 1c).				1
8	See Part IV, line 18 a 125, 548.				
Ēί	b Less: direct expenses b 125,324.	Í			[
0	c Net income or (loss) from fundraising events	224.			
	9a Gross income from gaming activities See Part IV, line 19		'		
}	b Less: direct expenses. b	ł			}
	c Net income or (loss) from gaming activities				
\					
	10a Gross sales of inventory, less returns and allowances				
- }	b Less: cost of goods sold b	}			}
	-		-	-	-
ł	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
}				-	-
}					
ĺ	b		 -		
ſ	C				
ŀ	d All other revenue				
\	e Total. Add lines 11a-11d	0=0	400.000		
	12 Total revenue. See instructions	<u>258,207.</u>	106,910.	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)

			5,010 00/4/////3 (5), (6), 1		
	Check if Schedule O contains a re	sponse to any question i	n this Part IX		
	not include amounts reported on lines 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		<u></u>		
	and organizations in the United States. See Part IV, line 21	19,000.	19,000.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	29,000.	29,000.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. 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 accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management]	}	}	
	Legal				
	: Accounting				
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
	Other	} -			
	Advertising and promotion	750.		750.	
13	Office expenses	700.			
14	Information technology				
15	Royalties				· · · · · · · · · · · · · · · · · · ·
	Occupancy			····	
	Travel	10,882.		10,882.	
	Payments of travel or entertainment	10,002.		10,002.	
18	expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings.	9,215.	8,338.	877.	
20	Interest				
21	Payments to affiliates				- -
22	Depreciation, depletion, and amortization	6,839.		175.	<u>6,664</u> .
23	Insurance	15,693.	15,693.		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	In-kind epxenses	83,000.			83,000.
	Printing and Publications	19,578.	18,415.	1,163.	
	Miscellaneous	5,172.	939.	1,819.	2,414.
	Postage and Shipping	3,529.	3,094.	435.	
	All other expenses	13,275.	2,611.	4,718.	5,946.
	Total functional expenses Add lines 1 through 24e	215, 933.	97,090.	20,819.	98,024.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here	213,333.	31,030.	20,017.	30,024.
	SOP 98-2 (ASC 958-720)				

Pa	art X	Balance Sheet			
			(A) Beginning of year	1	(B) End of year
	1	Cash – non-interest-bearing	82,952.	1	151,223
	2	Savings and temporary cash investments	187,210.	2	155,525
	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	<u>.</u>	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	
Ş	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
T 5	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 298, 527.			
	Ь	Less: accumulated depreciation 10b 70,719.	222,120.	10 c	227,808.
	l	Investments – publicly traded securities		17	
	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)	497,652.	16	539, 926.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue.		19	
Ļ	20	Tax-exempt bond liabilities		20	
À	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
AB I L I T	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
E S	23	Secured mortgages and notes payable to unrelated third parties		23	
ร	ł	Unsecured notes and loans payable to unrelated third parties		24	
İ		Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
Ĕ		Organizations that follow SFAS 117, check here ► X and complete lines			
7	1	27 through 29 and lines 33 and 34.	ſ	1	
ASSETS	27	Unrestricted net assets	283,419.	27	304,584.
Ē	28	Temporarily restricted net assets.		28	
	29	Permanently restricted net assets	214,233.	29	235,342.
R F		Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
F UZB B	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ļ	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALANCES	33	Total net assets or fund balances	497,652.	33	539,926.
É	34	Total liabilities and net assets/fund balances	497,652.	34	539,926.

BAA

Form 990 (2011)

For	m 990 (2011) CASI - Chili Appreciation Society	74-2330479		Pi	age 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	111	2	58 1	207.
2		2			933.
3		3			274.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			552.
5		5	-	<u> </u>	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	5	39,	926.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
)	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				\
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	b Were the organization's financial statements audited by an independent accountant?	·	2b		X
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh review, or compilation of its financial statements and selection of an independent accountant?	t of the audit,	2c	_	;
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	I			
1	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	issued on a			
		_	ĺĺ		1
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a		X
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	required audit	3b		

BAA

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name o	f the	organization	CASI -	- Chil	i Appre	ciation Society	,				Employe	dentificat	bon number		
			Intern	nation	al Inc	•						330479			
Par	<u>L</u>	Reason	for Publ	ic Char	ity Status	(All organizations	must c	omple	te this	part.)	See ir	structi	ons.		
The c	rgai					e it is. (For lines 1 throu									
1		A church, d	convention	of churc	hes or asso	ciation of churches desc	cribed in	section	170(b)(1)(A)(i).					
2	П	A school de	escribed in	section	170(b)(1)(A)	(ii). (Attach Schedule E	E.)		*						
3	П	A hospital	or a coope	rative ho	spital servic	e organization describe	d in sect	ion 1 70 ((b)(1)(A)	(iii).					
4	П					in conjunction with a hi					ЪХ 1ХАХ	iii). Ente	er the hosp	ntal's	
		name, city,				•	•					•	•		
5		An organiz 170(b)(1)(A	ation oper Xiv). (Cor	ated for t	he benefit o art II.)	f a college or university	owned o	or opera	ited by a	govern	mental	unit desc	cribed in se	ction	
6						overnmental unit descrit									
7	금	ın section	170(b)(1)(A	(C)	omplete Par	•	•	_	ernmen	tal unit d	or from 1	he gene	eral public o	iescrib	ped
8	_		-			0(b)(1)(A)(vi). (Complete		•							
9	(X)	from activition	ties related Income ai	d to its ex nd unrela	empt function ited busines) more than 33-1 <i>1</i> 3% of ons — subject to certain s taxable income (less s nplete Part III.)	exception	ons, and	l (2) no i	more tha	an 33-1/	3% of ⊪ts	s support fr	om ar	oss
10	Ш	An organız	ation orga	nized and	d operated e	xclusively to test for pu	blic safe	ty. See	section	509(a)(4)				
11		more public	cly support	ted organ	iizations des	xclusively for the benef cribed in section 509(a) ion and complete lines	(1) or se	ection 50)9(a)(2).	tions of See se	or carr ction 50	y out the 9(a)(3). ——	purposes Check the	of one box th	e or nat
		a Type		b (Type II	c ∐Type Ⅱ		_	-			d []	Type III -		r
е	Ш	By checkin other than section 509	foundation	, I certify n manage	that the org	anization is not controller than one or more publ	ed direct licly supp	ly or ind oorted oi	lirectly b rganizati	y one o ons des	r more o scribed i	lisqualifi n sectior	ed persons n 509(a)(1)	or	
f			nization re	ceived a	written dete	rmination from the IRS	that is a	Type I,	Type II (or Type	III supp	orting or	ganization,		
g		Since Augi	ıst 17, 200	6, has th	e organizati	on accepted any gift or	contribu	ition froi	n any of	the foll	owing p	ersons?			
													,	Yes	No
		(i) A per	san who d	lirectly or	undurectly co	antrols, either alone or toported organization?	ogether	with per	sons de	scribed	ru (n) at	vd (m)	11g (i)	, '	}
				_		ped in (i) above?							11g (ii)	├──	
			_			described in (i) or (ii) ab	20102						11g (iii)	 	 -
L				-	•	e supported organization							<u> </u>	<u> </u>	<u> </u>
<u>, h</u>		(i) Name of su organizat	pported		i) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) i organiz column (i your go	s the ation in i) listed in overning	(v) Did your survival	ızatıon in i 1 (i) of	(vi) !: organiz colun organize	ation in in (i) id in the	(vii) Amoun	t of sup	port
			1]		}	— —	ment?	\	Alo	Vac				
				 		 	Yes	No	Yes	No	Yes	No			
									ļ	i			ı		
<u>(A)</u>				 		 	 -	 -	 		 				
(B)							<u> </u>						·		
<u>(C)</u>				} -		 	} -	 -	} -	<u> </u>					
(D)				<u> </u>		ļ	-	<u> </u>			<u>-</u>	<u> </u>			
<u>(E)</u>															
Total									_						
	For	Paperwork	Reductio	n Act No	tice, see the	Instructions for Form 9	90 or 99	0-EZ			Schedul	e A (For	m 990 or 9	90-EZ	2011

Schedule A (Form 990 or 990-EZ) 2011 CASI - Chili Appreciation Society 74-2330479

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.)

Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to 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 ime 4		}	}		}	
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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)						
17	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	ities, etc (see inst	ructions)			12	
	First five years. If the Form 990 is organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3)	•
	tion C. Computation of Pu						
	Public support percentage for 20	• .	.,	e 11, column (f))		14	<u>%</u>
	Public support percentage from 2	•	,			15	<u>%</u>
16 a	33-1/3% support test — 2011. If the and stop here. The organization of	ne organization di qualifies as a pub	d not check the b licly supported or	ox on line 13, and ganization	the line 14 is 33-1	/3% or more, che	ck this box
	33-1/3% support test — 2010. If the and stop here. The organization of	qualifies as a pub	licly supported or	ganızatıon			•
17 a	10%-facts-and-circumstances test or more, and if the organization in the organization meets the 'facts	neets the 'facts-a	nd-circumstances	s' test, check this l	oox and stop here .	. Explain in Part IV	0% ′ how ►
t	or more, and if the organization reganization meets the 'facts-and	neets the 'facts-a I-circumstances' t	nd-circumstances est. The organiza	test, check this to tion qualifies as a	oox and stop here. publicly supported	Explain in Part IV d organization	how the
18	Private foundation. If the organiz	ation did not ched	ck a box on line 1	3, 16a, 16b, 17a,		box and see instru	

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.)

Sec	tion A. Public Support	2.04 Delott, piedse	complete raft ii.	,			
	dar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(n Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants.')	52,037.	52,160.	73, 216.	49,438.	68,073.	(f) Total 294, 924.
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	100,123.	100,894.	106,012.	124,945.	125,548.	557,522.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or						0.
	facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	152,160.	153,054.	179,228.	174,383.	193,621.	852,446.
7 a	i 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	0					
,	for the year Add Ines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line	·					<u> </u>
	7c from line 6.)						852,446.
	dar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(-) 2011	(9. Taka)
	Amounts from line 6	152,160.	153,054.	179,228.	174,383.	(e) 2011 193, 621.	(f) Total 852, 446.
	Gross income from interest,	132,100.	133,034.	113,220.	1/4,303.	193,021.	032,440.
	dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	7,907.	5,318.	2,456.	2,086.	1,177.	18,944.
	acquired after June 30, 1975	7.007	F 210	2.456	2 006	1 177	0.
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	7,907.	5,318.	2,456.	2,086.	1,177.	18,944.
12	whether or not the business is regularly carried on Other income. Do not include						0.
12	gain or loss from the sale of capital assets (Explain in Part IV.)	ļ					0.
13	Total support. (Add ins 9, 10c, 11, and 12)	160,067.	158,372.	181,684.	176,469.	194,798.	871,390.
14	First five years. If the Form 990 is organization, check this box and	s for the organizat	ion's first, second	, third, fourth, or t	ifth tax year as a	section 501(c)(3)	▶ [
Sec	tion C. Computation of Pu		ercentage				
	Public support percentage for 20			13, column (f))		15	97.83 %
16	Public support percentage from 2	•		,		16	97.14 %
	tion D. Computation of Inv			e			
	Investment income percentage for				n (f))	17	2.17 %
18	Investment income percentage fr	•		•	••	18	2.86 %
19a	33-1/3% support tests — 2011. If is not more than 33-1/3%, check	the organization di this box and stop	id not check the b here. The organiz	ox on line 14, and ation qualifies as	l line 15 is more that a publicly support	nan 33-1/3%, and la ed organization	ıne 17 ► X
b	33-1/3% support tests — 2010. If the line 18 is not more than 33-1/3%,	the organization di check this box ar	id not check a box id stop here. The i	on line 14 or line organization quali	19a, and line 16 fies as a publicly s	is more than 33-1/3 supported organiza	3%, and ►

Schedule A	4 (Form 990	or 990-EZ) :	<u> 2011 C</u>	:ASI	Chili	Appre	ciation	Society	У	74-2330)479	Page 4
Part IV	Supplem Part II, III (See inst	ental Info ne 17a or ructions)	ormatio 17b; ar	n. Comp nd Part	olete th III, line	is part to 12. Also	provide comple	the expl ete this pa	anations ort for any	74-2330 required by additional	Part II, line nformation.	10;
									- <i></i>			
								_ ~				
		-										
			-									
							~-~-					
	- -				-							-
			<i></i> _				- -					
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OFFICERS AND DIRECTORS - 2012/2013

President ED BLAIR

Houston, Texas

Vice President

JIM EZELL

Wichita Falls, Texas

Vice President & Secretary

DARIN JESTER

Indianapolis, Indiana

Treasurer

DAVID SEXTON

Dallas, Texas

Executive Director

RICHARD KNIGHT

Lebanon, Tennessee

Tally Master

JENNY WINDSOR

Severna Park, Maryland

Director

LEE KROENCKE

Lenexa, Kansas

Director

ROBERT SCHRADE

San Antonio, Texas

Director

RANDY DUKE

Texas

Director

Glenda Vrba

Garland Texas

Director

Mary Ellen Gillen

Comfort, Texas

Non-Board Support

Old 320 Alcalde

RALPH HAY

Pasadena, Texas

Computer and Financial Support

JIM STATECZNY

Comfort, Texas

Scholarship

NANCY HEWLETT

Murphy, Texas

Krazy Flats Coordinator

DON HOY

Cuero, Texas

CASI



PO Box 307 Bellaire, TX 77402-0307 832-567-5558 ol_jock_chili@swbell.net

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 See separate instructions.

OMB No 1545-0047

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) Aggregate grants from (during year) Aggregate value at end of year 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? No 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 No purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements 2b 2<u>c</u> c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 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 ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 ▶\$ 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)? 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. 1a 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 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: ÞŚ a Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X ▶\$ Schedule **D** (Form 990) 2011

	- Chill Appi			74-233		Page 2
Part III Organizations Mainta	ining Collection	is of Art, Hist	<u>orical Treasures, o</u>	or Other Similar As	sets (cont	inued)_
3 Using the organization's acquisiting tems (check all that apply)	on, accession, and c	ther records, che	ck any of the following t	that are a significant use	e of its collec	:tion
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e U Other				
c Preservation for future gener	ations					
4 Provide a description of the organ Part XIV.	nization's collections	and explain how	they further the organiz	ation's exempt purpose	ın	
5 During the year, did the organizar assets to be sold to raise funds r	tion solicit or receive ather than to be mai	donations of art,	historical treasures, or the organization's colle	other similar ediນກ ^າ	Yes	No
Part IV Escrow and Custodia line 9, or reported an	I Arrangements	. Complete if	the organization ai		orm 990, F	Part IV,
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or ot	her intermediary	for contributions or othe	er assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and com	plete the followin	g table:			
					Amount	
c Beginning balance				1c		
d Additions during the year				1d		
e Distributions during the year				1 e		
f Ending balance				[1f [- i
2a Did the organization include an a		Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement	in Part XIV.		187 11 5	000 D 1 1 1 / 1	10	
Part V Endowment Funds. Co	· ·	T				
_	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ars back
1 a Beginning of year balance					 	
b Contributions		 			 	
 Net investment earnings, gains, and losses 						
d Grants or scholarships						
 Other expenditures for facilities and programs 						
f Administrative expenses		<u>.</u>			-	
g End of year balance	<u>.</u>	1				
2 Provide the estimated percentage			e 1g, column (a)) held a	S:		
a Board designated or quasi-endov		8				
b Permanent endowment ►	%					
c Temporarily restricted endowmer		%				
The percentages in lines 2a, 2b,	and 2c should equal	100%				
3a Are there endowment funds not a organization by:	n the possession of	the organization t	hat are held and admin	stered for the	Yes	s No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(ii), are the related of	organizations listed a	s required on Scl	hedule R?		3b	<u> </u>
4 Describe in Part XIV the intended	•				L	
Part VI Land, Buildings, and						
Description of property	(a) Co	st or other basis investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1a Land	`		110,615.		11	0,615.
b Buildings			171,464.	57,442.	11	4,022.
c Leasehold improvements	<u> </u>					
d Equipment			7,731.	7,029.		702.
e Other			8,717.	6,248.		2,469.
Total. Add lines 1a through 1e. (Colum	nn (d) must equal Fo	rm 990, Part X, c	olumn (B), line 10(c))	•	22	7,808.
ВАА				Sched	dule D (Form	990) 201

	(Form 990) 2011	<u>eciation Societ</u>	y 74-2330479 Page 3
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) Financi	ial derivatives		
(2) Closely	y-held equity interests		
(3) Other			
<u>(A)</u>			
(G)			
(H)		-	
(1)		-	
	mn (b) must equal Form 990 Part X, column (B) line 12.).	•	//
	Investments - Program Related. Se		line 13. N/A
1 411 711	(a) Description of investment type	(b) Book value	(c) Method of valuation
	(a) Becompact of investment gpe	(b) Book Value	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
	in (b) mast equal rollingso, rait N, column (b) mic ro.)	>	
Dartiv	101b A C F 000 D V	L 1E N7/3	
Part IX	Other Assets. See Form 990, Part X		(b) Book value
		, line 15. N/A escription	(b) Book value
(1)			(b) Book value
(1)			(b) Book value
(1) (2) (3)			
(1) (2) (3) (4)			
(1) (2) (3) (4) (5)			
(1) (2) (3) (4) (5) (6)			
(1) (2) (3) (4) (5) (6) (7)			
(1) (2) (3) (4) (5) (6) (7) (8)			
(1) (2) (3) (4) (5) (6) (7) (8) (9)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	(a) D	escription	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	(a) D	escription (B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	olumn (b) must equal Form 990, Part X, column olumn (b) must equal Form 990, Part X	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	(a) Description of liability	escription (B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X	olumn (b) must equal Form 990, Part X, column olumn (b) must equal Form 990, Part X	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) (3)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) (3) (4)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) (3) (4) (5)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) (3) (4) (5) (6)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) (3) (4) (5) (6) (7)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) (3) (4) (5) (6) (7) (8)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) (3) (4) (5) (6) (7) (8) (9)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) (3) (4) (5) (6) (7) (8) (9) (10)	(a) Description of liability	B), line 15)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co [Part X] (1) Fede (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	(a) Description of liability eral income taxes	B), line 15) t X, line 25. (b) Book value	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co [Part X] (1) Fede (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column ((a) Description of liability	B), line 15) t X, line 25. (b) Book value	

Cabadula B. Carra 000) 0011 CACT Child Barrana dati a Child	2220476
Schedule D (Form 990) 2011 CASI - Chili Appreciation Society 74- Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	2330479 Page 4
1 Total revenue (Form 990, Part VIII, column (A), line 12)	N/A
2 Total expenses (Form 990, Part IX, column (A), line 25)	
3 Excess or (deficit) for the year. Subtract line 2 from line 1	
4 Net unrealized gains (losses) on investments	
5 Donated services and use of facilities	
6 Investment expenses	
7 Prior period adjustments	
8 Other (Describe in Part XIV.)	
9 Total adjustments (net). Add lines 4 through 8	
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn N/A
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains on investments	
b Donated services and use of facilities 2b	
c Recoveries of prior year grants	
d Other (Describe in Part XIV.)	
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	\
b Other (Describe in Part XIV)	
c Add lines 4a and 4b	5
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments 2b	
c Other losses	
d Other (Describe in Part XIV.)	
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIV.)	
c Add lines 4a and 4b	4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIV Supplemental Information	5
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, line Part V, line 4; Part X, line 2; Part XI, line 8; Part XIII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this any additional information	es 1b and 2b; s part to provide

Schedule D (Form 990) 2011 CASI - Chili Appreciation Society	74-2330479	Page 5
Schedule D (Form 990) 2011 CASI - Chili Appreciation Society Part XIV Supplemental Information (continued)		
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SCHEDULE G (Form 990 or 990-EZ)

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

2011

Open to Public Inspection

Name of the organization CASI - Ch	ili Appreciat	ion So	cietv		E	mployer identifica	tion number
Internati	onal inc					74-233047	9
Part I Fundraising Activities. (Form 990-EZ filers are r	Complete if the organ not required to comple	iization an: ete this pa	swered 'Ye rt	es' to Form 990, Part IV	/, line 17.		
1 Indicate whether the organiz	ation raised funds thr	ough any	of the follo	wing activities Check a	all that app	oly	
a Mail solicitations			е	Solicitation of non-	governme	nt grants	
b Internet and email solicit	ations		f	Solicitation of gove	rnment gr	ants	
c Phone solicitations			g	Special fundraising	_		
d In-person solicitations			,		,		
2a Did the organization have a	written or oral agreen	nent with a	any individi	ual (including officers, o	directors, t	rustees or key	/ _ 📾
employees listed in Form 990				=		_	Yes X No
b If 'Yes,' list the ten highest p compensated at least \$5,000	by the organization	ities (fundr	raisers) pu	rsuant to agreements u	under whic	h the fundrais	er is to be
(i) Name and address of individ or entity (fundraiser)	ual (ii) Activity		fundraiser	(iv) Gross receipts	(v) Amo	ount paid to	(vi) Amount paid to
or entity (fundraiser)		of contri	dy or control ibutions?	from activity	(or re	tained by) ser listed in	(or retained by)
	}	}		!		umn (1)	or garneadorr
		Yes	No				
1							
2							
3							
4							
5							
6							
7						···	
8							
9							
10							
T-1-1		<u>'</u>				•	
3 List all states in which the org	ganization is registers	ed or licen	sed to solv	cit contributions or has	heen note	fied it is evem	ot from registration
or licensing	guinzation is registere	54 01 110011	304 10 3011	or correspond or mas	Doorriog	ilod it is exciti	pt nom rogist attori
				· 			

	t II	G (Form 990 or 990-EZ) 2011 CASI - Fundraising Events. Complete If th	e organization ans	wered 'Yes' to Forn	74-23 n 990. Part IV. line	18. or reported
•		more than \$15,000 of fundraising List events with gross receipts gro	event contribution	is and gross incom	e on Form 990-EZ	I, lines 1 and 6b.
			(a) Event #1 Terlingua Int'	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))
R			(event type)	(event type)	(total number)	unough column (c)
R モンモンUE	1	Gross receipts	125,548.			125,548.
-	2	Less. Charitable contributions				
	3	Gross income (line 1 minus line 2)	125,548.			125,548.
	4	Cash prizes	10,000.			10,000.
,	5	Noncash prizes	4,800.			4,800.
DIRECT	6	Rent/facility costs				
	7	Food and beverages				
EXPENSES	8	Entertainment				
N S E	9	Other direct expenses	110,524.			110,524.
s	10	Direct expense summary Add lines 4 thro	-		>	125,324.
225	11	Net income summary. Combine line 3, co Gaming. Complete if the organization		oc' to Form 900 Pa	ort IV Juno 10 or re	224.
aı		\$15,000 on Form 990-EZ, line 6a	ation answered Te			eported more than
REVERUE			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
N U E	1	Gross revenue				
Ē	2	Cash prizes				
EXPENSES	3	Non-cash prizes			· · · · · · · · · · · · · · · · · · ·	
E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)		•	
	8	Net gaming income summary Combine fi	nes 1, column (d) and i	ine 7	-	
			erates gaming activities			

Schedule **G** (Form 990 or 990-EZ) 2011

b If 'Yes,' explain

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

dule G (Form 990 or 990-EZ) 2011 CASI - Chili Appreciation Society	14-233	804/9	Page 3
Does the organization operate gaming activities with nonmembers?		Yes	No
Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity for administer charitable gaming?	rmed to	Yes	No
Indicate the percentage of gaming activity operated in.	1 1		
	13a		%
·	13Ь		ૄ
Enter the name and address of the person who prepares the organization's gaming/special events books an	d records	i.	
Name ►			
Address ►			
If 'Yes,' enter the amount of gaming revenue received by the organization > \$ and		Yes	No
Name ►			
Address ►			
Gaming manager information:			
Name ►			·
Gaming manager compensation ► \$			
Description of services provided			
Director/officer Employee Independent contractor			
Mandatory distributions			
Is the organization required under state law to make charitable distributions from the gaming proceeds to restate gaming license?	ain the	Yes	No
5 5	spent in	the	ш
organization's own exempt activities during the tax year > \$		<u> </u>	
columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appetiths part to provide any additional information (see instructions).	red by l dicable	Part I, line . Also cor	e 25, nplete
			·
TEEA3703L 05/20/11 Schedu	ıle G (Fo	rm 990 or 99	90-EZ) 2011
	Does the organization operate gaming activities with nonmembers? Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity for administer drantable gamining? Indicate the percentage of gaming activity operated in. The organization's facility An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and Name F. Address F. Does the organization have a contact with a third party from whom the organization receives gaming revenue if 'Yes,' enter the amount of gaming revenue received by the organization F. gaming revenue retained by the third party. Name F. Address F. Gaming manager information: Name F. Gaming manager compensation F. Bescription of services provided F. Director/officer Employee Independent contractor Mandatory distributions Is the organization required under state law to make charitable distributions from the gaming proceeds to ret state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or organizations was exempt activities during the tax year F. \$\frac{1}{2}\$ Supplemental Information, Complete this part to provide the explanations required columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as apply this part to provide any additional information (see instructions).	Does the organization of graind person who prepares the organization's gaming schildren and address of the person who prepares the organization's gaming/special events books and records. 13a	Does the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

SCHEDULE I (Form 990)		Gra	ints and Oth irnments, an	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	Organizations the United Sta	s, tes		2011
Department of the Treasury Internal Revenue Service		Complet	e if the organizatio	Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.	m 990, Part IV, lines 21	or 22.	.]	Open to Public Inspection
	Annreciation S	Society					Employer Identification number 74-2330479	don number
1.	formation on G	General Information on Grants and Assistance	ınce					
1 Does the organizate the selection criter	ition maintain records ria used to award the	s to substantiate the ar grants or assistance?	nount of the grants	The selection criteria used to award the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Occasion 19 19 the grants that for a properties for monitoring the use of grant finds in the Holled	ees' eligibility for the gr	ants or assistance, an	D	Yes X No
Part II Grants and Form 990, Part II can	d Other Assistar Part IV, line 21	Grants and Other Assistance to Governments and O Grants and Other Assistance to Governments and O Form 990, Part IV, line 21 for any recipient that received Part II can be duplicated if additional space is needed	nts and Organi hat received m	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	ed States. Comple	ete if the organizatione rece	tion answered 'Y	es' to \$5,000. ▶
1 (a) Name and address of organization or government	ss of organization ment	(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 70852	6. VFD			000 %	0			Assist EMS & VFD in local area
(<u>s)</u>								
(4)								
(<u>6)</u>								
(9)								
€ ₁								
(8)								
1	r of section 501(c)(3)	Enter total number of section 501(c)(3) and government organization	E	s listed in the line 1 table			A A	
S Enter total number of other organizations listed in the line is date. BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	eduction Act Notice,	Enter total number of other organizations listed in the line I dole For Paperwork Reduction Act Notice, see the Instructions for Fo	or Form 990.		TEEA3901L 06/01/11	06/01/11	Schedu	Schedule I (Form 990) (2011)

Page 2 I (Form 990) (2011) CASI - Chili Appreciation Society

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2011)
Part III Grants and Otl

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Scholarships to attend college	30	29,000.			
Supplemental Information. Complete this part to		orovide the information required in	tion required in Pa	Part I, line 2, and any ot	and any other additional information.
	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	; 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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	! ! ! ! !	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 4 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1					

Schedule I (Form 990) (2011)

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SCHEDULE M (Form 990)

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

2011

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization CASI - Chili Appreciation Society International Inc

Employer identification number

74-2330479

Par	t 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	Meth noncash	contrib	letermır	ning mounts
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	8	52,000.				
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
25	Other ► (Trophies, Misc)	X	13	21,000.	Retail	L		
26	Other ► (Computer Supprt)	X	1	10,000.	Retai:	<u> </u>		
27	Other ► ()							
28	<u>Other</u> ► ()			<u> </u>				
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done	on during the	e tax year for contribut Igement	ions for which the	29			0
							Yes	No
30 a	During the year, did the organization receive by chold for at least three years from the date of the i	ontribution a	ny property reported in	Part I, lines 1-28 that	ıt must ຸ	-		4
	purposes for the entire holding period?	nitial contrib	oution, and which is not	t required to be used to	r exempt	30 a		X
b	If 'Yes,' describe the arrangement in Part II							
31	Does the organization have a gift acceptance poli	cy that requi	ires the review of any r	non-standard contribution	ons?	31		<u>X</u>
32a	Does the organization hire or use third parties or noncash contributions?	related orga	nizations to solicit, prod	cess, or sell		32 a		X
	If 'Yes,' describe in Part II							1
33	If the organization did not report an amount in co	lumn (c) for	a type of property for v	which column (a) is che	cked,			
	describe in Part II					ll		
BAA	For Paperwork Reduction Act Notice, see the Ins	tructions fo	r Form 990.		Schedu	le M (F	orm 99	0) 2011

Schedule	M (Form 990) 2011	<u> CASI - Chili</u>	. Appreciat:	ion Societ	<u>- دې</u>	74-	<u>2330479</u>	Page 2
Part II	Supplemental	Information. Con	nplete this par	t to provide	the inform	74- nation required by (b), the number of this part for any a	Part I, lines	30b, 32b,
	number of item	is received, or a	combination of	ing in Fait of both. Also	complete	this part for any a	i contribution additional info	ormation.
					-	·		
				- 				
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

2011

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.

Open to Public Inspection

International Inc	Employer identification number 74-2330479
Form 990, Part III, Line 4b - Program Service Accomplishments	
CASI grants of scholarships on a national basis. Currently prov	riding \$1,000 per year
scholarships to approximately 30 students	·
	·
At the first board meeting of each fiscal year, the board author	rizes 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 graduat	ing student. The
application_form_is_posted_on_the_CASI_web_siteApplicants_mu	st_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_ir	dividually, and then
rank them in the order in which they believe the scholarships s	should be granted.
The committee chairman then tabulates the results from the comm	ittee members and
announces the winners.	
Form 990, Part III, Line 4c - Program Service Accomplishments	
CASI publishes and mails to its members a monthly newspaper that	t informs our members
of our upcoming cookoffs, cookoff results, and other happenings	in the chili world.
	. – – ~ + – – – – – – – – – – – – – – – –
In is also distributed at cookoffs to nonmember contestants, ju	dges 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.	

Name of the organization CASI - Chili Appreciation Society International Inc	Employer identification number 74-2330479
Form 990, Part III, Line 4c - Program Service Accomplishments	2000117
The paper is funded through the dues of the membership as well	as a minimal amount
of advertising revenue, being \$3,084 in 2011.	
Form 990, Part III, Line 4d - Other Program Services Description	
CASI has obtained liability insurance covering sanctioned cooks	offs for which it
assesses a \$1 per cook fee to be used to pay the premiums.	222_222_22222222
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directo	rs, Etc.
Outgoing President Renee Moore is the daughter-in-law of the In	coming President 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 due	es current for the
non-life members.	
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Bo	dy
Individual members have a voice in voting to elect the governing	g body by being a
member of an Affiliated Pod, which is our name for a chapter. I	hrough 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 b	ousiness meeting,
called the Great Peppers Meeting named for the presidents of th	e chapters whom are
called Great Peppers. At the Great Peppers Meeting, 4 new Direc	tors are elected by
secret written ballot. The two candidates receiving the most vo	tes serve for 3 year
terms. The two remaining candidates that win serve for 2 year t	erms. An Executive
Director is elected in a separate race every other year to serv	re a two year term.

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Federal Supplemental Information

CASI - Chili Appreciation Society International Inc Page 1

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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 occuring 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 fundaiser revenue as are the purchases.

For 2011, the revenues from these items totaled: \$28,275 For 2011, the purchases of these items totaled: \$20,598

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. \$13,926 were raised in 2011 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.

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Federal Supplemental Information

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CASI - Chili Appreciation Society International Inc

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74-2330479

Statement of Internal Financing

The Life Membership Reserve Fund was established to provide for the annual costs of our Life Members which number 511 as of December 31, 2011. 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. 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. 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 ten 4-year college, 1 partial college (one year), and three 2-year trade school scholarships in May of 2012.
 (8) All of CASI's profits go to charity.

(9) We are making a difference through chili!

2011 Federal Supporti CASI - Chili Appreciati International I	
9/07/13 Contributions, Gifts, and Grants	06 11
Contributions, Gifts, and Grants Membership dues and assessments Annual Membership Dues Corporate Membership Dues Life Membership Dues	\$ 13,866. 2,400. 1,800. Total \$ 18,066.
Contributions, Gifts, and Grants Other contributions, gifts, grants, etc.	
Sponsorship - net of amounts to TICC Underwriti	Total \$ 50,007.
Code Note	
Scholarships paid	Total \$ 29,000.
Code Note	
Grants to local community organizations Rules and Sanctioning services GPM - Annual Business Meeting Membership services TallyMaster Rounding	\$ 19,000. 3,733. 8,338. 1,849. 2,189. Total \$ 35,110.

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Federal Worksheets
CASI - Chili Appreciation Society
International Inc

74-2330479

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Form 990, Part IX, Line 24e Other Expenses

	(A)	(B)	(C)	(D)
	То	tal	Program Services	Management <u>& General</u>	Fundraising
Bad Debts - NSF cks Bank Charges Legal fees		100. 330. 1,400.		100. 330. 1,400.	
Membership Plaques Memorial Board Exp Other Expenses		2,515. 4.		2,515. 4.	
Property taxes Publicity Expenses Ranch electricity Ranch maintenance Scholarship admin costs		3,111. 1,917. 542.	542.		3,111. 1,917.
Special Event - Baghdad CC Supplies Telephone		1,727. 1,629. 13,275.	1,358. 711. 3 2,611.	369. \$ 4,718.	918. \$ 5,946.

12/31/11		20	2011 Fed	eral	Boo	k Dep	Federal Book Depreciation Schedule	ion Sc	hedu	<u>e</u>					Page 1
				CAS	I-Chil	hili Appreciation International Inc	CASI - Chili Appreciation Society International Inc	ociety				İ		7	74-2330479
9/07/13 Na. Description	Date Acourted	Date Sold	Cost/ Basis	Bus. Pet.	Cur 179 Bonus.	Special Depr. Allow	Prior 179/ Bonus/ So. Depr.	Prior Dec Bal. Denr.	Salvage /Basis Reductn	Depr. Basis	Prior Denc.	Method	gi -	Rate	06 39AM Current Deor.
990/990-PF) 				 -					•		
Buildings															
2 Buildings	12/31/90		36,860							36,860	23,570	S/L	L 31.5		1,170
3 Buildings	12/31/97		11,500							11,500	4,745	S/L	L 31.5		365
4 Burldings	12/31/98		10,000							10,000	3,804	S/L	L 315		317
	12/31/00		40,000							40,000	12,700	SVL			1,270
	12/31/04		15,679							15,679	2,988	S/L			498
	12/31/05		10,979							10,979	1,745	S/L			349
	12/31/06		10,159							10,159	1,292	ZV.			323
	12/31/07		15,537							15,537	1,479		က		493
	8/12/10		7,200							7,200	g ;				185
	5/12/10		001,1							90,'1	<u> </u>				29 3
	5/06/10		800							000		S/L MM	ee S	.02564	21
27 Admın Bldg 4/27/12	4/27/11	'	11,650	J		Ì			İ	11,650				·	0
Total Buildings			171,464		0	0	0	0	0	171,464	52,423				5,019
Land															
l Land	12/31/89	ı	39,968	ļ						39,968				·	0
Total Land			39'68		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

12/31/11		~	2011 Fed		Roo	k Der	eral Rook Depreciation Schedule	on Sc	hedu	نه (Page 2
		ĺ	5 - -		E E	i Appre ernatio	CASI - Chili Appreciation Society	ociety						74	74-2330479
	Date	Date	Cost/	Bus,	Our 179	Special Depr.	Prior 179/ Bonus/	Prior Dec. Bal. Dec.	Salvage /Basis	Depr.	Prior	Method	aţi a	Rate	O6-39AM Current Depr
13 Land Dev Costs - 1997	Acquued		11.500	1	1	William.	- Ac. Legill.			11,500		l			0
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
	2/06/10		2,950							2,950					0
22 Land Impr - 320 Wall	5/06/10	-	1,615	ı						1,615				ł	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	,		0
	9/09/11		877				Ī		ļ	877		200DB HY	2	.20000	175
Total Machinery and Equipment			7,731	ı		0		0 6,854	0	877	0				175
Miscellaneous															
18 Sign	12/31/92		200							200	200	200DB HY	. 5		0
20 Sign - CASi Inc	11/01/09		7,217	I	į Į					7,217	3,103	200DB MQ	2	.22800	1,645
Total Miscellaneous			111,1		0	0		0 0	0	717,7	3,603				1,645
Total Depreciation			297,527	ı li		0		0 6,854		290,673	26,026			ı (l	6,839
Grand Total Depreciation			297,527	11	0	0		6,854	0	290,673	56,026			II	6,839