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)

2012

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

Open to Public Inspection

	<u>A</u>	For the	2012 calend	dar year, or tax year b	eginning	, 2	012, and endin	g		,	
	В	Check if	applicable	C					D Employer Iden	tification Number	
		Add	ress change	CASI - Chili	Appreciati	on Society		j	74-2330)479	
		Nam	ie change	International				j	E Telephone num		
		\vdash	i return	PO Box 307					(022) 5	667-5558	
		 		Bellaire, TX	77402-0307				(632) 3	01-3330	
		\vdash	ninated					ļ			
		\vdash	nded return	<u> </u>				-	G Gross receipts		
		Appl	lication pending	F Name and address of p	rincipal officer			3	group return for af	ffiliates? Yes	X No
				Same As C Abo	ve				iffiliates included? ittach a list (see in	estructions) Yes	∐ No
	ı	Tax-ex	empt status	X 501(c)(3) 501(c	c) () 1	insert no.) 4947(a)(1) or 527	`		0000000	
	j	Webs	íte: ► ww	w.chili.org an	nd www.cas	ichili.net		H(c) Group e	xemption number	-	
₩	K	Form o	f organization	X Corporation Trust		Other▶	L Year of Format			legal domicile TX	
2014		rt I	Summar				1	1300			
				be the organization's n	nissian ar mast :	significant activities.	Our mice	ion ic	to promot	ce chili and	
				ney for charit		=					<u> </u>
\rightarrow	ဋ			000 is raised							
AUG	펼			ward scholars						r dratit	<u>.</u> y
₹	Ę.			ox I if the organiz							
0	છુ	3 N	umber of vo	iting members of the g	iovernina body (1	Part VI line 1a)	isposed of mor	e man 25%	3	513.	11
M	∘ಕ			dependent voting mem			ine 1b)		4		$\frac{11}{11}$
55	ies			of individuals employe	_		•		5		-11
SCAMED	Activíties & Governance			of volunteers (estimat					6		500
ર્જે	Act			ed business revenue fr		lumn (C), line 12			7a	 	0.
W.	_	ı		l business taxable inco					7 b		0.
						$\triangle \triangle$	$\neg m$	Pri	or Year	Current Year	
		8 C	ontributions	and grants (Part VIII,	line 1h)	e u tu mi	$\mathbf{P}_{\mathbf{N}}$		151,073.	150,9	
	Revenue			rice revenue (Part VIII,			1 11		105,733.	102,2	
9	Ne		_	come (Part VIII, colum		. and 7d)	<i>.</i> =		1,177.		374.
2014	22			e (Part VIII, column (A				<u> </u>	224.	-22,5	
~				- add lines 8 through	-	·	. line 12)		258,207.	230,9	
	\neg			milar amounts paid (P			, , , , , , , , , , , , , , , , , , ,		48,000.	48,2	
				to or for members (Pa	-	· ·		-	40,000.	40,2	.50.
JUL	ĺ		=	er compensation, empl			es 5.10\				
_	Se				-		100 0 10)				
	Expenses			undraising fees (Part I							
Ogden Ogden	흦	b To	otal fundraisi	ing expenses (Part IX,	, column (D), line	e 25) >	106,300.				
≅ &	۳	17 O	ther expense	es (Part IX, column (A	i), lines 11a-11d,		167,933.	190,6	52.		
ఫై ర్థా		18 To	otal expense	es. Add lines 13-17 (mi	ust equal Part IX	(, column (A), line 25)	i		215,933.	238,9	02.
		19 Re	evenue less	expenses Subtract lin			42,274.	-7,9	45.		
- 8	8 8							Beginning	of Current Year	End of Year	
	Asset	20 To	otal assets (F	Part X, line 16)				1	539,926.	531,9	81.
ပ	25	21 To	otal liabilities	s (Part X, 1ine 26).					0.		0.
,	Net /	22 No	et assets or	fund balances. Subtra	act line 21 from li	ne 20			539,926.	531,9	181
	Pa	rt II	Signature						333,320.		01.
					turn unalisation assama	anuma cabadulas and statemen	ata and to the best s	f my knowlodge	and bolief it is to so	correct and	
	comp	lete Decla	ration of prepar	ere that I have examined this ref rer (other than officer) is base	ed on all information	of which preparer has any kr	nowledge	i iliy kilowieugi	and belief, it is due	, correct, and	
				CIM-		,	-		9-7-13		
	Sig	n	Signature	e of officer		 		Date			
	Hei	re	► Fd F	Blair				Presi	dent		
				print name and title				LTCOT	dent_		
			Print/Type pr	reparer's name	Preparer's sig	nature	Date		⊅heck If	PTIN	
]	Toparon o mamo	1 .]		*"eck "		
	Pai				Self-Pi	ehared		s	elf-employed		
		parer	Firm's name								
	US	Only	Firm's addres	ss					îrm's EfN ►		
			1					F	Phone no		
				s return with the prepa						Yes	No
	BAA	For Pa	nerwork Re	duction Act Notice, se	ee the separate i	nstructions.	TEE	A0113L 12/1	8/12	Form 990 (2	2012)

1-917

Form 990 (2012) CASI - Chili Appreciation Society	74-	23304	79	F	Page 2
Part III Statement of Program Service Accomplishments					
Check if Schedule 0 contains a response to any question in this Part III 1 Briefly describe the organization's mission.					X
CASI Chili Appreciation Society International, Inc.'s mission raise money for charity.					and
2 Did the organization undertake any significant program services during the year which were not list	ed on the prio	r			
Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	ed on the pho		Yes	X	No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program if 'Yes,' describe these changes on Schedule O.	m services?		Yes	X	No
4 Describe the organization's program service accomplishments for each of its three largest program Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the others, the total expenses, and revenue, if any, for each program service reported.	services, as in the amount of g	measureo grants an	d by exp d alloca	pense ations	es . to
4a (Code) (Expenses \$ 37,653. Including grants of \$ 20,500 Other programs:	_	\$	56	6,53	37.
CASI makes Grants to local school, charitable and governmenta area of the cookoff as the area is a low income community. \$2		zation	ns in	t <u>h</u>	 e
CASI has an annual business meeting of which a \$1 fee is asse underwrite the cost. The national organization has begun host of one (or more) of the affiliated Pods (chapters). The exces from the Great Peppers Meeting Fund to the General Fund after concluded.	ing the s funds the mee	neetir raised ting i	ng in lare .s	lio mo	eu
4b (Code.) (Expenses \$ 27,964. including grants of \$ 27,750 See Schedule 0				 	
4c (Code:) (Expenses \$25,238. Including grants of \$) (Revenue	\$.,79	4.)
4d Other program services (Describe in Schedule O.) (Expenses \$ 16,340. including grants of \$) (Revenue)	e \$	15,8	380.)		
4e Total program service expenses ► 107, 195.	-				
AA TEEA0102L 08/08/12			Form 9	990 (2	2012)

			res	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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3_		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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in 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, VIII, IX, or X as applicable.			
•	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
J	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	116		Х
•	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	11 c		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		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		_X
	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 f		х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		<u> </u>
i	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 and XII is optional	12 b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
14 e	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Ł	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		Х
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		Х
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		Х
7	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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part Vill, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
k) 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 2º If 'Yes,' complete Schedule I, Parts I and III	22	х	
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		Х
24	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		Х
i	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		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
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		Х
	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):			
1	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	,—	X_
1	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
•	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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> </u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, fine 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ŀ	olf 'Yes' to line 35a, 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		
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (2	2012)

Form 990 (2012) 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			
1 - Enter the murches was did to Day 2 - (E 1000 E. L		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a	3		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0[Į	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable (gambling) winnings to prize winners?	ele gaming 1 c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	0		
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	215		1
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		-	+-
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		†
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other autho financial account in a foreign country (such as a bank account, securities account, or other financial account	rity over, a		Х
b If 'Yes,' enter the name of the foreign country: ►	´ 	 	
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accou	nts		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	ļ	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization strat were not tax deductible as charitable contributions?	inization 6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or enot tax deductible?	gifts were 6 b		
7 Organizations that may receive deductible contributions under section 170(c).		 	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods services provided to the payor?	and 7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	<u> </u>	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requ Form 8282?	ured to file 7 c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			-
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract	7e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 889 as required?	99 7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file. Form 1098-C?	le a 7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess bus holdings at any time during the year?	Did the iness		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	. 9a		i
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 ь		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		İ	ı
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders [11 a]	1 1	' <u>'</u>	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b if 'Yes, enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a is the organization licensed to issue qualified health plans in more than one state?	13a	. [
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in			
which the organization is licensed to issue qualified health plans	} }	1	
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
BAA TEEA0105L 08/08/12	Form	990 C	2012)

74-2330479 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 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 11 If there are material differences in voting rights among members 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 1 h 11 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? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?. 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Δ X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 See Schedule O 6 X Did the organization have members or stockholders? 7 a 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 X members of the governing body? 7 a 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? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8 b X Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O See Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Х 10 a Did the organization have local chapters, branches, or affiliates? to If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b X 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 X **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 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise X to conflicts? 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 12 c 13 13 Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 14 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? 15 a a The organization's CEO, Executive Director, or top management official 15_b X **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 Х taxable entity during the year? 16 a b If '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 16_b organization's exempt status with respect to such arrangements? 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 Other (explain in Schedule O) Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule 0 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: Bellaire TX 77402-0307 (832) 567-5558 Blair PO Box 307

BAA

age 7

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees; and former such persons

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

				((;)					
(A) Name and Title	(B) Average hours per week (list	one bo	ox, un	less	perso	k more in is bot or/truste	h an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) David Sexton	16									
Treasurer & Dir	00	X		X				0.	0.	0.
(2) Richard Knight	24_									
Executive Dir.	0	X		X				0.	0.	0.
_(3)_Ed_Blair	16						ΙI			
President & Dir	0	X		Х				0.	0.	0.
_(4)_Jim_Ezell	16_						ΙÍ			
Vice Pres & Dir	0	Х		X			Ш	0.	0.	0.
(5) Dana Plocheck Term exp	16_						ΙI			
Vice Pres & Dir	0	Χ					Ш	0.	0.	<u> </u>
(6) Randy Duke	16						ΙI			
Director	0	X						0.	0.	<u> </u>
	8	. 1					ΙI			
Director	0	X				_	Ш	0.	0.	0.
(8) Darin Jester	16_									
Director	0	X						0.	0.	0.
(9) Jenny Windsor	16_				J					
Director	0	Х					Ш	0.	0.	0.
(10) Lee Kroencke	16		- 1		ı		1 1		İ	
Director	0	X						0.	0.	0.
(11) Glenda Vrba	16									
Director	0	Х						0.	0.	0.
(12) Roger Foltz	16		Ī							
Secy & Dir	0	X		X				0.	0.	0.
(13) Janice Miller Term exp	24									
Exec Director	0	X		X				0.	0.	0.
(14)										
		j					oxed			

Part VII Section A. Officers, Directors, Truste	es, Ke	у Еі	mpl	oye	es,	, and	d H	ighest Comper	sated Employe	es (cor	nt)
	(B)			((-			ĺ		{	
(A) Name and title	Average hours per	box	, unle	check ess p	erson direct	e than i is bot tor/trus	th an stee)		(E) Reportable compensation from		(F) stimated ant of other
	week (list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	corr fr org an	ppensation om the anization d related anizations
(15)											
(16)					-						
<u>(17)</u>			 								
(18)											· · · · · · · · · · · · · · · · · · ·
(19)	_ - - i										
(20)											
(21)											
(22)											
(23)									·		
(24)											
(25)											
1 b Sub-total		<u></u>	{				►	0.	0.		Ō.
c Total from continuation sheets to Part VII, Section A	١.					ı	-	0.	0.		0.
d Total (add lines 1b and 1c)						•	-	0.	0.		0.
2 Total number of individuals (including but not limited from the organization ▶ 0	to thos	e list	ted	abov	/e) \	who r	rece	eived more than \$	100,000 of reportab	le comp	ensation
											Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste Idividuai	ee, ƙa /	еу е	mpl	oyee	e, or	higl	hest compensated	í employee	3	<u>x</u>
For any individual listed on line la, is the sum of rej the organization and related organizations greater the such individual									om	4	X_
5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' or the organization of the organization of the organization of the organization.	ompensa complete	ation Sch	fror edu	n ar <i>le J</i>	ny ui for :	nrela such	ted	organızatıon or ın	dıvıdual	5	X
Section B. Independent Contractors	·										
1 Complete this table for your five highest compensation from the organization. Report comper	ed indep nsation	ende	ent d	cont	ract dar	ors ti year	hat end	received more tha ding with or within	n \$100,000 of the organization's t	ax year.	
(A) Name and business addres	s	-				_		(B) Description o	f services	(C Comper	
					-		\exists				
							\dashv				
 Total number of independent contractors (including \$100,000 in compensation from the organization 	but not	limite	ed to	tho	se I	ısted	l ab	ove) who received	I more than		
PAA		FF A N 1	001	01.00	1/12		_			Form 6	200 (2012)

Part VIII Statement of Revenue Check if Schedule O contains a re-

	Check if Schedule O contains a response to any quest	ion in this Part VIII			
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAD AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in ins 1a-1f; h Total. Add lines 1a-1f Business Code	150,900.			
٤	2a Other Programs	56,547.	56,547.		Į
25	b Scholarship Program	28,023.	28,023.		
S	c Cookoff & Other Insurance	15,880.	15,880.		
S	d Monthly Newspaper	1,794.	1,794.		
Æ	e	1,7,54.	1,774.)		
ğ	f All other program service revenue.				
쮼	g Total. Add lines 2a-2f ▶	102,244.			
	 3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 	374.	374.		
	5 Royalties				
OTHER REVENUE	(i) Real (ii) Personal 6 a Gross rents b Less' rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)				
	8a Gross income from fundraising events (not including \$_ of contributions reported on line 1c). See Part IV, line 18 a 131,279. b Less: direct expenses b 153,840. c Net income or (loss) from fundraising events	-22,561.			
ļ	9 a Gross income from gaming activities	1 7	T		
ĺ	See Part IV, line 19				
	b Less: direct expenses b	<u> </u>	})
	c Net income or (loss) from gaming activities				
Į	10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory				
- 1		1	1		
	11a b c				
	d All other revenue				
	e Total. Add lines 11a-11d				
İ	12 Total revenue. See instructions	230,957.	102,618.	0.	0.

Sec	ction 501(c)(3) and 501(c)(4) organizations must on the Check if Schedule O contains a result of the Check if S			ust complete column (A)	'
			(B)	(C)	
7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
7	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	20,500.	20,500.		•
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	27,750.	27,750.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	27,7003.	21,71001		
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):				
æ	Management		ļ		
Ł	Legal		T		
	Accounting				
•	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees		-		
g	Other (If line 11g amt exceeds 10% of line 25, col-				
10	umn (A) amt, list line 11g expenses on Sch 0)	0.050		2 262	
	Advertising and promotion	2,068.		2,068.	
13	· ,				
14	Information technology				
15	Royalties				·
16	Occupancy	11 000		11 070	
17	Travel	11,870.		11,870.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,963.	10,460.	1,503.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,427.		1,684.	6,743.
23	Insurance	16,340.	16,340.		
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.)				
8	In-kind epxenses	88,250.			88,250.
	Postage and Shipping	17,946.	17,102.	844.	
	Printing and Publications	14,216.	12,323.	1,893.	
	Other Expenses	4,786.	189.	3,881.	716.
	All other expenses	14,786.	2,531.	1,664.	10,591.
25	Total functional expenses. Add lines 1 through 24e	238, 902.	107,195.	25,407.	106,300.
	· • • • • • • • • • • • • • • • • • • •	230,302.	107,133.	20, 401.	100,000.
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 ► ☐ if following SOP 98-2 (ASC 958-720).				

		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	151,223.	1	71,753.
	2	Savings and temporary cash investments	155,525.	2	194,987.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
_	6	Loans and other 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). Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net.	•	7	
ASSETS	8	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·	8	
T 5	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 339,017.			
	b	Less: accumulated depreciation 10b 79,146.	227,808.	10 c	259,871.
	11	Investments – publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11	,	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	5,370.	15	5,370.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	539, 926.	16	531,981.
	17	Accounts payable and accrued expenses	0007020.	17	302/3021
	18	Grants payable		18	
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond habilities		20	
Ā	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
LI ABILITIES	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
į	23	Secured mortgages and notes payable to unrelated third parties		23	
s	24	Unsecured notes and loans payable to unrelated third parties		24	·
	25	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.
NE.		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
Ą	27	Unrestricted net assets .	304,584.	27	283,466.
ANNELS	28	Temporarily restricted net assets.		28	
s	29	Permanently restricted net assets	235,342.	29	248,515.
R		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
P DZC	30	Capital stock or trust principal, or current funds	f	30	
D	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ÃÌ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ā	33	Total net assets or fund balances	539,926.	33	521 001
おくしく さいしゅん	34	Total liabilities and net assets/fund balances	539, 926.	34	531,981.
BA/		Total habilities alla het assetshalla balanets	333,320.	<u> </u>	531, 981.

Forr	m 990 (2012) CASI - Chili Appreciation Society	74-2330479)	Pa	age 12					
Pa	rt 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)	11	2	30,	957.					
2	Total expenses (must equal Part IX, column (A), line 25)	2			902.					
3	Revenue less expenses. Subtract line 2 from line 1	3			945.					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			926.					
5	Net unrealized gains (losses) on investments	5								
6	Donated services and use of facilities	6								
7	7 Investment expenses 7									
8	Prior period adjustments	8								
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5:	31,9						
Pa	rt XII Financial Statements and Reporting									
	Check if Schedule O contains a response to any question in this Part XII									
	and the second s			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 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev separate basis, consolidated basis, or both:	lewed on a								
	Separate basis Consolidated basis Both consolidated and separate basis			i						
ŧ	Were the organization's financial statements audited by an independent accountant?		2 b		Х					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepasis, consolidated basis, or both:	oarate								
	Separate basis Consolidated basis Both consolidated and separate basis		1 1							
•	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c							
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.									
3 8	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		Х					
ŀ	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	3 b							
BAA			Form	990 (2012)					

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2012

Open to Public Inspection

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

CASI - Chili Appreciation Society International Inc Employer identification number 74-2330479

Part				(All organizations					See i	<u>nstruct</u>	ions.		
The o	rganız	ation is not a priva	ate foundation becaus	e it is. (For lines 1 throi	ugh 11,	check or	nly one l	oox.)					
1	∏ A	church, conventio	on of churches or asso	ciation of churches des	cribed in	n section	170(b)	(1)(A)(i).					
2		school described	in section 170(b)(1)(A)(ii). (Attach Schedule E	Ξ)								
3	ПА	hospital or a coop	perative hospital servi	ce organization describe	ed in sec	tion 170	қьх1ха	Xiii).					
4	$\prod A$	medical research	organization operated	t in conjunction with a h	ospital d	describei	d in sec	tion 17 9	(ЬХ1ХА	Xiii). Ent	er the hosp	oital's	
	na	me, city, and stat	e.										
5		organization ope 0 (b)(1)(A)(iv). (Co	rated for the benefit of the property of the part II.)	of a college or university	owned	or opera	ated by a	govern	mental	unit des	cribed in se	ction	
6			_	overnmental unit descri									
7	Hm	section 170(b)(1)((A)(vi). (Complete Pa		•	_	vernmer	ntal unit	or from	the gen	eral public	describ	bed
8	∐ A	community trust o	lescribed in section 1 3	70(b)(1)(A)(vi). (Complet	te Part I	1)							
9	rel: uni	ated to its exempt f	unctions — subject to ce	ore than 33-1/3% of its sup rtain exceptions, and (2) r on 511 tax) from businesse	no more t	han 33-1	/3% of it:	s support	from gr	oss inves	tment incom	e and	
10	L An	organization orga	anized and operated e	exclusively to test for pu	blic safe	ty. See	section	509(a)(4) .				
11	suյ	oported organization	ized and operated excluss described in section to the time. It is and complete line.	sively for the benefit of, to 509(a)(1) or section 509(a) ss 11e through 11h.	perform (2). See	the funct section	tions of, 6 509(a)(3)	or carry o	out the p the box t	urposes o hat descr	of one or mo or the type	re publi of	icly
	а	∏Type I	b ∏Type li	Type III - Functio	nally inte	egrated		d 🗍 .	Type III	- Non-f	unctionally	integra	ated
e	ᆜ otr	checking this box er than foundation tion 509(a)(2).	(, I certify that the org	anization is not controller than one or more publ	ed direct	tly or inc	lirectly b rganizat	y one o ions des	r more scribed	disqualifi in section	ed persons n 509(a)(1)	or	
f		` , , ,	eceived a written dete	rmination from the IRS	that is a	Type I,	Type II	or Type	III supp	orting or	ganızatıon,		
g	Sır	nce August 17, 20	06, has the organizati	on accepted any gift or	contribi	ution fro	m anv o	f the fol	lowina i	persons?			
•		,	, 3									Yes	No
	(i)		directly or indirectly c erning body of the su	ontrols, either alone or oported organization?	together	with pe	rsons de	escribed	ın (II) a	ınd (III)	11 g (i)		110_
	(ii)	A family memb	er of a person descri	oed in (i) above?							11 g (ii)		
	(iii)	A 35% controll	ed entity of a person	described in (i) or (ii) ab	ove?						11 g (iii)		
'n	Pro	ovide the following	niformation about th	e supported organizatio	n(s)						,	Щ.	<u> </u>
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	column (Is the zation in (i) listed in overning ment?			organii	Is the zation in in in it is the sed in the S?	(vii) Amount of support		netary
					Yes	No	Yes	No	Yes	No			
(A)								į					
					1	1]				
(B)					1	\ ,	i			1			
							i e			ľ			
(C)				}]	}	}	,)			
(D)													
_		··-											
<u>(E)</u>			 		 -								
Total													
RAA F	or Pai	perwork Reduction	n Act Notice, see the	Instructions for Form 9	90 or 99	0-EZ.			Schedul	e A (For	m 990 or 99	30.F7	2012

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

	(Complete only if you check organization fails to qualify the	ed the box on lin	e 5, 7, or 8 of Part	l or if the organiz	zation failed to qui		
Sec	tion A. Public Support			-			
	endar year (or fiscal year inning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 line 4						
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see ins	tructions)			12	
13	First five years. If the Form 990 organization, check this box and	s for the organiza	ation's first, secon	d, third, fourth, or	fifth tax year as a	a section 501(c)(3	· [
	tion C. Computation of Pu						
	Public support percentage for 20	14	%				
15	Public support percentage from 2	2011 Schedule A,	Part II, line 14			15	%
16 a	33-1/3% support test — 2012. If t and stop here. The organization	he organization o quaìifies as a puì	did not check the b blicly supported or	oox on line 13, and ganization	d the line 14 is 33.	-1/3% or more, cl	neck this box
ł	33-1/3% support test — 2011. If the and stop here. The organization	ne organization d qualifies as a pu	id not check a box blicly supported or	on line 13 or 16a ganization	a, and line 15 is 33	3-1/3% or more, o	check this box
17 a	10%-facts-and-circumstances tea or more, and if the organization in the organization meets the 'facts	meets the 'facts-a	and-circumstances	' test, check this l	box and stop here	e. Explain in Part	IV how
ŧ	o 10%-facts-and-circumstances tea or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	and-circumstances	s' test, check this	box and stop here	e. Explain in Part	15 is 10% IV how the ►
18	Private foundation. If the organiz	ation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	box and see ins	tructions -

Schedule A (Form 990 or 990-EZ) 2012

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.)

	tion A. Public Support										
	ndar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
1	Gifts, grants, contributions and membership fees received (Do not include					50 550	205 505				
_	any funusual grants.")	52,160.	73,216.	49,438.	68,073.	62,650.	305,537.				
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	100,894.	106,012.	124,945.	125,548.	131,279.	588,678.				
3	Gross receipts from activities that are not an unrelated trade or business under section 513	100,034.	100,012.	124, 545.	123,340.	101,210.	0.				
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or						0.				
Ū	facilities furnished by a governmental unit to the organization without charge	j					0.				
	Total. Add lines 1 through 5	153,054.	179,228.	174,383.	193,621.	193,929.	894,215.				
7 8	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.				
ı	and 3 received from other than alsqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13	0.1			0.1		<u> </u>				
	for the year	0.	0.	0.	0.	0.	0.				
	: Add lines 7a and 7b	0.	0.	0.	0.	0.	0.				
_	Public support (Subtract line 7c from line 6.)						894,215.				
Section B. Total Support Calendar year (or fiscal yr beginning in) > (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total											
-	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	153,054. 5,318.	179,228. 2,456.	174,383. 2,086.	193,621. 1,177.	193,929. 374.	894,215. 11,411.				
ł	o Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	5,316.	2,450.	2,000.			0.				
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	5,318.	2,456.	2,086.	1,177.	374.	11,411.				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.				
13	Total support. (Add Ins 9, 10c, 11, and 12)	158,372.	181,684.	176,469.	194,798.	194,303.	905,626.				
14	First five years. If the Form 990 is organization, check this box and	s for the organizat				section 501(c)(3)	▶ □				
	tion C. Computation of Pu										
	Public support percentage for 20			13, column (f))		15	98.74 %				
	Public support percentage from 2					16	97.78 %				
Sec	tion D. Computation of Inv						7 05 %				
17	Investment income percentage for				n (f))	17	1.26 %				
18	Investment income percentage fr	om 2011 Schedule	A, Part III, line 1	/		18	2.22 %				
	a 33-1/3% support tests — 2012. If is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	a publicly suppor	ted organization	- <u>N</u>				
	33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%	, check this box ai	na stop nere. Ine	organization qual	mes as a publicly	supported organiz	zation				
20	Private foundation. If the organiz	zation did not che	ck a dox on line 14	4, 19a, or 190, ch	eck inis dox and s	SEE II AN LICHOLIS					

Schedule /	A (Form 990 or 990-EZ) 2012	CASI - Chili	Appreciation Society	74-2330479	Page 4
Part IV	Supplemental Information Part II, line 17a or 17b; (See instructions).	. Complete this part III, line	art to provide the explanations 12. Also complete this part	required by Part II, line 10; for any additional information.	
			· 		
					·
					
					
	·				. — — —
					·

BAA

Schedule A (Form 990 or 990-EZ) 2012

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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
Employer identification number

	SI - Chili Appreciation Societ ternational Inc	У		74-2330479
		thrisad Funda or Other Circila	r Eundo ou Accounto	
Par	the organization answered 'Yes'	to Form 990 Part IV line	r runus or Accounts. A	Complete ii
	the organization answered res	, 		
		(a) Donor advised fun	ds (b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
	,			
5	Did the organization inform all donors and don are the organization's property, subject to the	or advisors in writing that the ass organization's exclusive legal con	ets held in donor advised trol?	l funds Yes No
	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing the of the donor or donor advisor, or	nat grant funds can be us for any other purpose co	sed only inferring Yes No
Par	t II Conservation Easements. Comp	lete if the organization ans	swered 'Yes' to Forr	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by			
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of an histor	ically important land area
	Protection of natural habitat		Preservation of a certified	· ·
	Preservation of open space			a
2	· · ·		while thou is the form of	
2	Complete lines 2a through 2d if the organizatio last day of the tax year.	n neid a qualified conservation co		a conservation easement on the
	lack day of the tan your			Held at the End of the Tax Year
_	Total number of conservation easements		2a	
	Total acreage restricted by conservation easen	aente	2 b	
	,			
C	: Number of conservation easements on a certifi	ed historic structure included in (a	26	
	Number of conservation easements included in structure listed in the National Register		2 d	
3	Number of conservation easements modified, to	ransferred, released, extinguished	d, or terminated by the or	rganization during the
	tax year •			
4	Number of states where property subject to cor			
5	Does the organization have a written policy regand enforcement of the conservation easement	arding the periodic monitoring, in ts it holds?	spection, handling of viol	ations, Yes No
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing cons	ervation easements durin	ng the year
7	Amount of expenses incurred in monitoring, ins	specting, and enforcing conservat	on easements during the	e year
	▶ \$			
8	Does each conservation easement reported on and section 170(h)(4)(B)(II)?	line 2(d) above satisfy the require	ements of section 170(h)	(4)(B)(i) Yes No
9	In Part XIII, describe how the organization repoinclude, if applicable, the text of the footnote to conservation easements	the organization's financial state	ments that describes the	organization's accounting for
Par	III Organizations Maintaining Collecti	ons of Art, Historical Treas	ures, or Other Simila	r Assets.
	Complete if the organization ans	wered 'Yes' to Form 990, F	Part IV, line 8.	
l a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finance	held for public exhibition, educat	on, or research in furthe	nt and balance sheet works of rance of public service, provide,
b	If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items:	SFAS 116 (ASC 958), to report in	its revenue statement a	nd balance sheet works of art, e of public service, provide the
	(i) Revenues included in Form 990, Part VIII, I	ine 1		► \$
	(ii) Assets included in Form 990, Part X.			. ▶\$
2	If the organization received or held works of an	t historical treasures or other sin	nilar assets for financial i	gain, provide the following
	amounts required to be reported under SFAS 1	16 (ASC 958) relating to these ite	ms.	
	Revenues included in Form 990, Part VIII, line	1		\$
b	Assets included in Form 990, Part X	<u></u>	<u> </u>	<u>►</u> \$
BAA	For Paperwork Reduction Act Notice, see the I	nstructions for Form 990.	TEEA3301L 09/18/12	Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 CASI	- Chili_A	ppreciation S	Society	74-233	
Part III Organizations Mainta	aining Collect	tions of Art, Hist	torical Treasures, o	r Other Similar Ass	sets (continued)
3 Using the organization's acquisitio items (check all that apply)	n, accession, and	other records, check	any of the following that a	are a significant use of its	collection
a Public exhibition		d Loan	or exchange programs		
b Scholarly research		e 🔲 Othe	r		
c Preservation for future gene	rations				
4 Provide a description of the organi Part XIII					
5 During the year, did the organize to be sold to raise funds rather to	than to be mainta	ained as part of the	organization's collection	1?	Yes No
Part IV Escrow and Custodial Ard reported an amount of	rangements. Com on Form 990, 1	mplete if the organi Part X, line 21.	zation answered 'Yes' t	o Form 990, Part IV, IIr	ie 9, or
1 a Is the organization an agent, tru on Form 990, Part X?				her assets not included	Yes No
b If 'Yes,' explain the arrangemen	t in Part XIII and	complete the follow	ring table.		
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance .	_		_	1 f	
2a Did the organization include an a					Yes No
b If 'Yes,' explain the arrangemen	t in Part XIII Che	eck here if the expla	antion has been provided	d in Part XIII	
Part V Endowment Funds. C		e organization ai	nswered 'Yes' to Fo		
	(a) Current	(b) Prior ye	ar (c) Two years	(d) Three years	(e) Four years
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentag	e of the current	vear end balance (li	ne 1g, column (a)) held	as.	_L
a Board designated or quasi-endowm		8	3, 1 1 (),		
b Permanent endowment ▶					
c Temporarily restricted endowmer		8			
The percentages in lines 2a, 2b,					
3a Are there endowment funds not in t		•	are held and administered	d for the	Yes No
organization by. (i) unrelated organizations.					3a(i)
					
(ii) related organizations	, 	, 2 an bawwaa an C	ahadula D2	•	3a(ii)
b If 'Yes' to 3a(ii), are the related of	-	•			3b
4 Describe in Part XIII the intended					
Part VI Land, Buildings, and					(4) 0 - 1 - 1
Description of property	(a)) Cost or other basis (investment)	basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	L	<u>. </u>	111,815.		111,815.
b Buildings		·	202,552.	63,023.	139,529.
c Leasehold improvements					
d Equipment			15,933.	8,888.	7,045.
e Other			8,717.	7,235.	1,482.
Total. Add lines 1a through 1e. (Colum	ın (d) must equa	l Form 990, Part X,			259,871.
BAA		 		Sched	ule D (Form 990) 2012

BAA

Schedule D (Form 990) 2012 CASI - Chili Appreciation Society	74-2330	479	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu		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 . 2a			
b Donated services and use of facilities .	7		
c Recoveries of prior year grants	7		
d Other (Describe in Part XIII)	7		
e Add lines 2a through 2d	2 e		
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 XIII.)	- ∱		
c Add lines 4a and 4b	4 c		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	eturn	N/A	
1 Total expenses and losses per audited financial statements	1 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	\dashv \mid		
c Other losses.	\dashv \sqcap		
d Other (Describe in Part XIII.)			
e Add lines 2a through 2d	2 e		
3 Subtract line 2e from line 1	3	_	
1 1	-		
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 4a			
b Other (Describe in Part XIII)	{		
c Add lines 4a and 4b	4 c		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5		
Part XIII Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II line 4; Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	/, lines 1b : y additiona	and 2b; Part	······································
RAA	Schedu	le D (Form 9	90) 2012

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part (V, 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.

Open to Public Inspection

					<u> </u>		<u> </u>
Name	of the organization CASI - Chili Internationa	Appreciat	cion So	ciety		Employer identification 74-233047	
Par	Fundraising Activities. Comp	lete if the organ	nization an	swered 'Ye	es' to Form 990, Part I	/, line 17	
1 a b c d	Indicate whether the organization in Mail solicitations Internet and email solicitations Phone solicitations	arsed funds thr or oral agreem VII) or entity in	nent with a	of the follo e f g any individuon with pro	Solicitation of non- Solicitation of gove Special fundraising ial (including officers, officers)	government grants ernment grants gevents directors, trustees or key ervices?	Yes _X No
	Name and address of individual or entity (fundraiser)	e organization.	(iii) Did	fundraiser dy or control ibutions?	(iv) Gross receipts	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
			Yes	No		column (i)	
1			103				
2							
3							
4							· · · · · · · · · · · · · · · · · · ·
5							
6					_		
7							
8							
9							
10							
Total 3	List all states in which the organiza	ition is registere	ed or licen	sed to solu	cit contributions or has	been notified it is exem	0. pt from registration
	or licensing.						

		e G (Form 990 or 990-EZ) 2012 CASI -				30479 Page 2
<u>(Pa</u>	n II	Fundraising Events. Complete if the more than \$15,000 of fundraising List events with gross receipts of	ng event contribution	ns and gross incom	30, Part IV, line 18, ne on Form 990-E	or reported Z, lines 1 and 6b.
RE			(a) Event #1 Terlingua Int' (event type)	(b) Event #2	(c) Other events None (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1	Gross receipts	131,279.			131,279.
Ē	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)	131,279.			131,279.
	4	Cash prizes	10,000.			10,000.
_	5	Noncash prizes	4,800.			4,800.
DIRECT	6	Rent/facility costs				
	7	Food and beverages				
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses	139,040.			139,040.
Ŝ	10	Direct expense summary. Add lines 4 thi	rough 9 in column (d)		-	153,840.
_	11	Net income summary Combine line 3, c		 -	•	-22,561.
Par	<u>t III</u>	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 68	on answered 'Yes' to a.	Form 990, Part IV, I	ine 19, or reported	more than
REVERUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
<u> </u>	1_	Gross revenue				
D E	2	Cash prizes				
DIRECT	3	Non-cash prizes				
TE	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes %	Yes %	
	7	Direct expense summary. Add lines 2 thi	rough 5 in column (d)		•	
	8	Net gaming income summary Combine	lines 1, column (d) and l	nne 7	•	
	is t	ter the state(s) in which the organization of the organization licensed to operate gaming No,' explain.		ese states?		Yes No
		re any of the organization's gaming license Yes,' explain:	es revoked, suspended o			Yes No
BAA			TEEA3702L 0	2.07/12	Schedule C (Fo	rm 990 or 990-EZ) 2012

Sched	ule G (Form 990 or 990-EZ) 2012 CASI - Chili Appreciation Society	74-2330479	Page 3
	Does the organization operate gaming activities with nonmembers?	Ye	s No
12 13	is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity fi administer charitable gaming?	ormed to	s No
13	Indicate the percentage of gaming activity exercted in	1 1	
	Indicate the percentage of gaming activity operated in. The organization's facility	13a	%
	An outside facility •	13b	
	Enter the name and address of the person who prepares the organization's gaming/special events books a		
יו	Name ►		
Å	Address	·	
b I1	Does the organization have a contact with a third party from whom the organization receives gaming revenue f 'Yes,' enter the amount of gaming revenue received by the organization		es No
١	Name ►		
Α	Address ►		i
16 G	Gaming manager information		
Ν	Name ►		
G	Gaming manager compensation ► \$		
D	Description of services provided		
	Director/officer Employee Independent contractor		
17 N	Mandatory distributions		
a Is	s the organization required under state law to make charitable distributions from the gaming proceeds to re	etain the	on DNa
	state gaming license?		es No
	rganization's own exempt activities during the tax year \$, oponk a 10	
Part		red by Part I, I plicable. Also o	ine 2b, complete
			 -
		_	
			000 ===================================
BAA	TEEA3703L 01/07/13 Schedi	ule G (Form 990 or	990-∟∠) 2012

SCHEDULE I		Gra	Grants and Oth	and Other Assistance to Organizations,	o Organization	,		OMB No 1545-0047
(Form 390)		Gove	Governments, an	d Individuals in	the United Sta	tes		2012
Department of the Treasury Internal Revenue Service		Comple	Complete if the organizati	s organization answered 'Yes' to Form 990, Part IV, line 21 <i>or</i> 22. ► Attach to Form 990.	rm 990, Part IV, line 21	or 22.	1	Open to Public Inspection
Name of the organization CAST - Chili Ar	Appreciation S	Society					Employer Identification number 74-2330479	itton number
	formation on G	General Information on Grants and Assistance	ınce					
 Does the organizathe selection criter Describe in Part IV 	tion maintain records ria used to award the V the organization's p	Does the organization maintain records to substantiate the amount of the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the	mount of the grants	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	tees' eligibility for the g	rants or assistance, ar	Pu	☐ Yes X No
Part II Grants and Form 990,	Other Assistand Part IV, line 21	ce to Governments for any recipient	sand Organizati that received m	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. Part II can be duplicated if additional space is needed.	tates. Complete if art II can be duplic	the organization a	answered 'Yes' to space is needed	
1 (a) Name and address of organization or government	ess of organization	(a)	(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	6 VFD			a	c			Assist EMS & VFD in local
(2) Terlingua School	1							To assist local
2281 Roadru	Circle			·				school in low
Terlingua, TX 79852	9852			\$,500.	0			income area
(3)								
(4)	 							
(6)								
(9)	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	-						
6								
(8)								
			1.0	1 4-61-				
	er of section 501(c)(3)	Enter total number of section 501(c)(3) and government organizations listed in the line I table	anizations listed in	the line I table				7
3 Enter total numbe	er of other organization	Enter total number of other organizations listed in the line 1 table	table			-	•	0
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	eduction Act Notice,	, see the Instructions	or Form 990.		TEEA3901L 11/30/12	11/30/12	Schedu	Schedule I (Form 990) (2012)

-1	Appreciation S	Society		7		Page 2
Part III Grants and Other Assistance to Individuals in the United States. Complete of the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	lividuals in the Unite tional space is need	d States. Complete I	f the organization a	nswered 'Yes' to Form 9		
(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	
College & Trade School 1 Scholarships	32	27,750.				
2						
က						
4						!
s						
9						
7						
Part IV Supplemental Information. Complete this part to additional information.		provide the information required in Part I, line	ion required in Pa	rt I, line 2, Part III, column (b),	umn (b), and any other	
	 		\		\	
1	 		\	 	\	
	 		\	 	\	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!
)	 	\	(\	i i t
	! ! ! ! !	 	\	! ! ! ! ! ! ! ! ! !	\	! ! !
1	 	\	\		\	
1	 	 	\	 	\	
!	! ! ! ! !	 	(\	
	; 	! ! ! ! ! !	\	1 	\]
	r 	 	\	1 1 1 1 1 1 1 1 1	! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !]

Schedule II (Form 990) (2012)

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

2012

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 Part · I Types of Property **(b)** Number of (c) (a) Check if (d) Noncash contribution Method of determining amounts reported on Form 990, contributions or applicable noncash contribution amounts items contributed Part VIII, line 1g 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 Securities - Closely held stock 10 11 Securities - Partnership, LLC, or trust interests. 12 Securities - Miscellaneous Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 15 Real estate - Residential Real estate - Commercial Real estate - Other 17 18 Collectibles Food inventory 53,500. Retail 19 8 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Х 20 21,000. Retail (Trophies, Misc 26 Other ► 27 Other ► 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the 0 organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No

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

30 a

purposes for the entire holding period? b If 'Yes,' describe the arrangement in Part II.

tions?

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

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

31 X 32a X

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

Schedule M (Form 990) 2012

describe in Part II

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

b If 'Yes,' describe in Part li

Schedule F	M (Form 990) 2012	CASI -	<u>Chi</u> li	Apprecia	<u>ıtion S</u>	<u>ocie</u> t	У			<u>74-2</u> 3	<u> 30479</u>		Page 2
Part II	M (Form 990) 2012 Supplemental Info and 33, and who number of items	ormation. ether the	Complete organiza	this part to ation is rep ambination	provide porting in of both	the inf Part Also	ormation I, column complete	require (b), the this p	ed by Pa he numl part for a	rt I, line ber of c any add	s 30b, 32 ontribut litional i	b, ions, nform	the
•			.,									-	
													
							~						
					· -								
												-	
													
- – – -			-								- -	_ .	_
					- -								
			- -		 -								
				. 									
								_					
						- -			. 				
				-		- -				_ -			
									. – – – –				
									- -				
. 			- -	- 									
									. _				
			-			-						_	
,													
- -			-										
						2/10/12					edule M (F		0) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 or 990-EZ.

Name of the organization CASI - Chili Appreciation Society Employer identification number 74-2330479 <u>International</u> Inc Form 990, Part III, Line 4b - Program Service Accomplishments CASI grants of scholarships on a national basis. Currently providing \$1,000 per year scholarships to approximately 30 students At the first board meeting of each fiscal year, the board authorizes the number of scholarships to be granted for the current year. This includes one scholarship for the Valedictorian of the Terlingua High School, and a specified number of additional scholarships that can be applied for by any high school graduating student. The application form is posted on the CASI web site. Applicants must fill out the application and mail it to the scholarship committee chairman. The applications are distributed to all of the committee members, who review them individually, and then rank them in the order in which they believe the scholarships should be granted. The committee chairman then tabulates the results from the committee members and announces the winners. Form 990, Part III, Line 4c - Program Service Accomplishments CASI publishes and mails to its members a monthly newspaper that informs our members of our upcoming cookoffs, cookoff results, and other happenings in the chili world. In is also distributed at cookoffs to nonmember contestants, judges and spectators as way to introduce them to additional chili cooking activities and see the charitable tally of funds raised. The October edition is larger as it is in the month just ahead of the chili championship event held at CASI's property in West Texas as it includes information on the cookoff and the surrounding areas.

Name of the organization CASI - Chili Appreciation Society	Employer identification number
International Inc	74-2330479
Form 990, Part III, Line 4c - Program Service Accomplishments	~
The paper is funded through the dues of the membership as wel	l 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 coo	koffs_for_which_it
assesses a \$1 per cook fee to be used to pay the premiums.	
Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholde	<u>r</u>
The Organization has annual member, life members and corporat	e members. Each member
has the same rights and privileges subject to keeping their d	ues current for the
non-life members.	
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing B	Body
Individual members have a voice in voting to elect the govern	ing body by being a
member of an Affiliated Pod, which is our name for a chapter.	Through such
membership, they can vote for officers in such Pod to represe	nt that Pod at the
annual business meeting.	
Pods in good standing are all permitted to vote at the annual	business meeting,
called the Great Peppers Meeting named for the presidents of	the chapters whom are
called Great Peppers. At the Great Peppers Meeting, 4 new Dir	ectors are elected by
secret written ballot. The two candidates receiving the most	votes serve for 3 year
terms. The two remaining candidates that win serve for 2 year	terms. An Executive
Director is elected in a separate race every other year to se	rve a two year term.
Form 990, Part VI, Line 9 - Officer, Director, Trustee, Key Employee Mailing A	ddress
The addresses of the Directors have been provided elsewhere,	because the
Organization maintains no office at the property we own. The	physical address of our
property is: 80 Mariposa Mine Rd Terlingua, TX	

2012 .

Federal Supplemental Information

CASI - Chili Appreciation Society International Inc

Page 1 74-2330479

9/07/13

06.23AM

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: \$32,168 For 2011, the purchases of these items totaled: \$19,794

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. \$12,967 were raised in 2012 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.

2012.

Federal Supplemental Information

Page 2 74-2330479

CASI - Chili Appreciation Society International Inc

9/07/13

06 23AM

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, 2012. It was determined that the fund needed to be increased from \$60,000 to \$100,000 to support this number of life members and the costs associated with their membership. The Fund also acts as an emergency working capital reserve.

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

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

At the Great Peppers meeting in 1994, the delegates approved the creation of the Great Pepper's Meeting Fund. This fund was established to help finance the annual Great Pepper's Meeting which is the annual business meeting of the organizatio. The fund would be funded by a \$1.00 assessment from each chili cook entry fee. The Great Peppers voted to have the national organization host the meeting in lieu of a local Pod or Pods. Any excess funds not spent on hosting the meeting are be transferred to the General Fund.

Other Points of Interest

(1) CASI is a 501(c)(3) Corporation.

(2) CASI has no paid employees or officers.
(3) In 1997, CASI paid for the construction of the school's basketball court (4) In 2000, CASI wrote a check in the amount of \$5,000.00, to assist four Terlingua High School graduates who at the very last minute lost their federal grants, to attend trade school to become diesel mechanics.

(5) CASI gives each Terlingua High School Valedictorian a four year,

\$1,000.00 per year, scholarship.

(6) The CASI National Scholarship Program was established in 2000. This program was set up to grant four year, \$1,000.00 per year scholarships, to students outside of the Terlingua area. In 2008, the program was expanded to include scholarships to students attending vocational schools for two years, \$1,000 per

(7) CASI now has many active scholarships in progress, and will award eleven 4-year college, and two 2-year trade school scholarships in May of 2013. (8) All of CASI's profits go to charity. (9) We are making a difference through chili!

Corporate Membership Dues Life Membership Dues Total Contributions, Gifts, and Grants Other contributions, gifts, grants, etc. Sponsorship - net of amounts to TICC Underwriting Total Code Note Scholarships paid Total Code Note Grants to local community organizations Membership services Rules and Sanctioning services TallyMaster GPM - Annual Business Meeting Rounding	Federal Supporting Detail Page 1 CASI - Chili Appreciation Society International Inc 74-2330479
Sponsorship - net of amounts to TICC Underwriting Code Note Scholarships paid Total Code Note Grants to local community organizations Membership services Rules and Sanctioning services TallyMaster GPM - Annual Business Meeting Rounding	bership dues and assessments all Membership Dues \$ 13,355. borate Membership Dues . 2,700.
Code Note Grants to local community organizations Membership services Rules and Sanctioning services TallyMaster GPM - Annual Business Meeting Rounding	
Grants to local community organizations Membership services Rules and Sanctioning services TallyMaster GPM - Annual Business Meeting Rounding	
	ts to local community organizations \$ 20,500. ership services 1,295. s and Sanctioning services 2,119. yMaster 2,138 Annual Business Meeting 11,601.

2012 .

Federal Worksheets

Page 1

CASI - Chili Appreciation Society International Inc

74-2330479

9/07/13

06.23AM

Form 990, Part IX, Line 24e Other Expenses

	(A)	(B) Program	(C) Management	(D)
	Total	Services	& General	Fundraising
Bad Debts - NSF checks Bank & Merchant Service Fees Legal fees	160. 749.		160. 749.	
Memorial Board expense Property taxes Ranch Electricity Ranch maintenance Scholarship admin costs	782. 4,084. 4,732. 214.	214.		782. 4,084. 4,732.
Supplies Telephone Total	2,863. 1,202. \$ 14,786.	2,108. 209. \$ 2,531.	755. \$ 1,664.	993. \$ 10,591.

12/31/12		~	2012 Fed	lera	Boo	k Den	deral Book Depreciation Schedule	ion Sc	hedi	<u>a</u>		} 			Pane 1
		Í	• •	CAS	Seign Francisco	full Appreciation International Inc	CASI - Chili Appreciation Society	ociety		2				7	74-2330479
9/07/13	Date	Date	Cost/	Bus.	Qur 179	Special Depr.	Prior 179/ Bonus/	Prior Dec. Bal.	Salvage /Basis	Depr.	Prior	1	<u> </u>	į	06:23AM
Form 990/990.PF	Acquired	piox	basis	-	Į.	Allow	- John Depr	- nebr	Keductn	Basis	Jahr	Weinod Life Kate	- - -	25 15 15 15 15 15 15 15 15 15 15 15 15 15	Venr
Buildings															
2 Buildings	12/31/90		36,860							36,860	24,740	S/L	L 31.5		1,170
3 Buildings	12/31/97		11,500							11,500	5,110	S/L	L 31.5		365
4 Buildings	12/31/98		10,000							10,000	4,121	T/S	L 31.5		317
	12/31/00		40,000							40,000	13,970				1,270
8 Buildings	12/31/04		15,679							15,679	3,486				498
7 Buildings	12/31/05		10,979							10,979	2,094				349
	12/31/06		10, 139 15, 537							10,139	6,10,1 670 ₁	7/S	31.5		323
22 Storage Bldg near stage	8/12/10		7,200							7,200	1,372	S/L		.02564	185
23 Roof btwn Judging-Concess	5/12/10		1,100							1,100	46	S/L MM	æ 33	,02564	28
. 24 Rock wall btwn Judg-Conc	5/06/10		800							800	34	S/L MM	₩ 39	02564	21
	4/27/12		18,620							18,620		S/L MM	M 39	-	339
	8/21/12		21,375							21,375		S/L MM	39 W		502
	9/26/12		1,100							1,100		S/L MM			∞
29 Building Improvements	10/25/12	•	1,643	ı						1,643		S/L MM	39 W	00535	6
Total Buildings			202,552		0	0	0	0	0	202,552	57,442				5,581
Land															
l Land	12/31/89	·	39,968		1		ļ			39,968					0
Total Land			39,968		0	0	0	0	0	39,968	0				. 0
												ļ			

12/31/12		2(2012 Fed		al Boc SI-Chi	Ook Deprecia Thili Appreciation International Inc	eral Book Depreciation Schedule CASI - Chili Appreciation Society International Inc	ion Society	chedu	<u> </u>				Page 2
	Date	Date	Cost/	Bus	176	Special Depr.	Prior 179/ Bonus/	Prior Dec. Bal.	Salvage /Basis	Depr.	Prior			06:23AM Current
Land Development Costs	Acquired		Danis	E E	Ronus	Allow	- John Trept		Keducin	Kasis	Dept	Memod Life Kate	_ Kale_	Vepr
10 Land Dev Costs - Var	12/31/93		14,102							14,102				0
11 Land Dev Costs - 1994	12/31/94		11,878							11,878				0
12 Land Dev Costs - 1995	12/31/95		3,900							3,900				0
13 Land Dev Costs - 1997	12/31/97		11,500							11,500				0
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
20 Land Impr - Mem Plaza	5/06/10		2,950							2,950				0
21 Land Impr - 320 Wall	5/06/10		1,615							1,615				0
30 Land Impr - behind stage	8/02/12		1,200							1,200			_	0
Total Land Development Costs			71,847		0	0	J	0	0 0	71,847		0		0
Machinery and Equipment														
18 Fullinment 1990 - 1992	12/31/92		6.854					6.854				2000R HV	^	C
	9/09/11		718							2 877	175		5 ,32000	8
31 Sound System	6/26/12		1,090							1,090		200DB HY		
32 Computers - 4	5/22/12		5,660							2,660		200DB HY	5 ,20000	1,132
33 Computer - Trails	12/10/12		1,452							1,452		200DB HY	5 ,20000	290
Total Machinery and Equipment			15,933		0	0	J	0 6,854	0	9,079	175	ĸ		1,859
Miscellaneous														
17 Stan	12/31/92		200							200	200	0 200DB HY	LC:	0
19 Sign - CASI Inc	11/01/09		7,217							7,217	4,748	• • •	5 ,13680	86
Total Miscellaneous			717,7		0	0	J	0	0 0	717,7	5,248	80		286

Page 3	06:23AM Current Depr.	8,427	8,427			
,	ife Rate	. "				
	Method Life Rate					
	Prior Depr.	92,865	62,865			
υ U	Depr. Basis	331,163	331,163			
hedul	Salvage /Basis Reductn					
ion Sc	Prior Dec. Bal. Depr.	6,854	6,854			
reciati	Prior 179/ Bonus/ Sp. Depr.	0	0			
2012 Federal Book Depreciation Schedule CASI - Chili Appreciation Society International Inc	Special Depr. Allow.	0				
al Boc ISI - Chi	Cur 179 Bonus.		0			
der	Bus. Pet		~ "			
012 Fe	Cost/ Basis	338,017	338,017			
21	Date Sold					
	Date Acquired					
12/31/12	7713 No. Description	Total Depreciation	Grand Total Depreciation			
12/.	9/07/13			 	 	1.12

Ed Blair - President	
P O Box 307	
Bellaire TX 77402-0307	
Home: (713) 686-4520	
Cell: (832) 567-5558	
Richard Knight - Executive Director	Roger Foltz - Secretary
216 Ashwood Drive	5024 Milam St
Elgin, TX 78621	Dallas, TX 75206
Cell (615) 480-4024	214-914-3733
Darin Jester – Vice President	David Sexton - Treasurer
P O Box 421034	PO Box 720387
Indianapolis IN 46242	Dallas, TX 75372
Home: (317) 856-3231	Cell: (817)-793-0656
Cell: (317) 319-4961	
Jim Ezell - Vice President/Sponsorship	Jenny Windsor - Tally Master
Jim Ezell - Vice President/ Sponsorship 3987 State Highway 79 South	Jenny Windsor - TallyMaster
3987 State Highway 79 South	390 South Drive
3987 State Highway 79 South Wichita Falls, Texas 76310	390 South Drive Severna Park, MD 21146
3987 State Highway 79 South	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999
3987 State Highway 79 South Wichita Falls, Texas 76310	390 South Drive Severna Park, MD 21146
3987 State Highway 79 South Wichita Falls, Texas 76310	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499 Glenda Vrba - Membership	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094 Robert Schrade - Ranch Manager
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499 Glenda Vrba - Membership PO Box 450907	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094 Robert Schrade - Ranch Manager 2231 Silver Mt.
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499 Glenda Vrba - Membership PO Box 450907 Garland, TX 75045 469-386-5600	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094 Robert Schrade - Ranch Manager 2231 Silver Mt. San Antonio TX 78264 Cell: (210) 823-3602
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499 Glenda Vrba - Membership PO Box 450907 Garland, TX 75045 469-386-5600 Randy Duke - Director	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094 Robert Schrade - Ranch Manager 2231 Silver Mt. San Antonio TX 78264 Cell: (210) 823-3602 Lee Kroencke - Public Relations
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499 Glenda Vrba - Membership PO Box 450907 Garland, TX 75045 469-386-5600 Randy Duke - Director PO Box 173	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094 Robert Schrade - Ranch Manager 2231 Silver Mt. San Antonio TX 78264 Cell: (210) 823-3602 Lee Kroencke - Public Relations P.O. Box 15239
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499 Glenda Vrba - Membership PO Box 450907 Garland, TX 75045 469-386-5600 Randy Duke - Director PO Box 173 Valley Mills, TX 76689	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094 Robert Schrade - Ranch Manager 2231 Silver Mt. San Antonio TX 78264 Cell: (210) 823-3602 Lee Kroencke - Public Relations P.O. Box 15239 Lenexa, KS 66285-5239
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499 Glenda Vrba - Membership PO Box 450907 Garland, TX 75045 469-386-5600 Randy Duke - Director PO Box 173	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094 Robert Schrade - Ranch Manager 2231 Silver Mt. San Antonio TX 78264 Cell: (210) 823-3602 Lee Kroencke - Public Relations P.O. Box 15239 Lenexa, KS 66285-5239 Cell: 913-754-6074
3987 State Highway 79 South Wichita Falls, Texas 76310 214-392-3499 Glenda Vrba - Membership PO Box 450907 Garland, TX 75045 469-386-5600 Randy Duke - Director PO Box 173 Valley Mills, TX 76689	390 South Drive Severna Park, MD 21146 Cell: (443) 878-7999 Fax: (410) 544-2094 Robert Schrade - Ranch Manager 2231 Silver Mt. San Antonio TX 78264 Cell: (210) 823-3602 Lee Kroencke - Public Relations P.O. Box 15239 Lenexa, KS 66285-5239