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### Form 990-EZ

Department of the Treasury

## Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-1150 20**09** 

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

Open to Public Inspection

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A F	or the 2	2009 calenda	r year,				<u>Ja</u>	anuary 1		, 2009, an	d ending	Dec	embe	er 31	, 20 09
<b>B</b> c+	neck if app		Please		lame of organ	iization						D Emp	loyer ı	dentific	cation number
=	ddress ch	arige	use IRS label or	rie		ediate Bulk (								75-237	4070
=	ame chan iitial retum		print or type	Nun	nber and stree	et (or PO box,	if mail is n	not delivered	to street ac	ddress) R	oom/suite	E Telep	ohone	number	
	erminated		See		Corporatio	n Service Co	o., 40 Te	chnology	Pkwy S.		300		8	66-600	0-8880
ቨℴ	mended r	eturn	Specific Instruc-		or town, state	e or country, ar	nd ZIP + 4				-	F Gro	up Ex	emptic	n
=	pplication		tions		cross, GA 3	30092							nber		N/A
	• Section	on 501(c)(3) (	organiz	izatio	ns and 4947	7(a)(1) nonex	emnt ch	aritable tr	usts must	attach	G Accou	ıntına M	ethod		Cash   Accrua
	- 000	o oo . (o)(o) .				le A (Form 9				attuon	I	(specify		• 🖵	545/7 E 7100/46
	-													organi	zation is <b>not</b>
ı w	ebsite	: ► www.i	fibca.co	com										-	le B (Form 990,
			heck or	only or	ne) — 📝 50	11(c) ( 6 ) <	finsert :	no) [ 49	947(a)(1) or	<u>527</u>	1 .	Z, or 99			D (i ci ccc,
	heck ►														an \$25,000. A
						ed, but if the									an \$25,000. A
						ross receipts,							NOLO 16	÷ turri	11944
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						ents				•			3		11933
	-	Investment								1 - 1			4	ļ	11
						s other than		,		_5a					
						es expense:				5b					
						other than						· _ ·	5c		
Ž	6	Special events	and acti	ctivities	(complete ap	plicable parts	of Schedu	le G). If any	amount is fr	om gaming	ı, check here			}	
Revenue	а	Gross rever	nue (no	ot inc	cluding \$_			of cont	ributions						
&		reported on	line 1)	1) .						6a					
	b	Less. direct	exper	enses	other than	fundraising	expens	ses .		6b					
	С														
	7a	Gross sales	of inv	vento	ry, less reti	urns and all	owance	s .		7a		0			
	b	Less: cost o	of good	ods so	old					7b		11	]		
	С	Gross profit	or (los	oss) fr	om sales o	of inventory	(Subtrac	ct line 7b	from line	7a) .			7c	1	(11
- 1		Other reven				•	•			,		,	8		
			•			4, 5c, 6c, 7	c. and 8	3					9		11943
						(attach sch							10		
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- 1		•				 id employee						• •	12	-	
Expenses						nents to ind							13		7941
ĕ		Occupancy					оронас			•		• •	14		
찚						antenance ind shipping	٠			• •			15		16
						ee Attachme					•	•	16	1	4747
												<u> </u>	17	-	12705
$\dashv$	18	Evenes or /	deficit)	Huu N for t	hover (C	rough 16 . ubtract line	17 from	line (I)							
Net Assets						beginning c							18		(7615
SS						nor year's re					iiusi agree		-	1	
<b>₹</b>		-	_		•	-							19		5000
2						ind balance							20		
						nd of year. (							21	1	4239
۲a	rt II	Balance	Snee					nn (B) are	\$1,250,0	JUU or mo					Form 990-EZ.
						ructions for	-				(A) Beg	ginning of			(B) End of year
22											<u> </u>		2142	-	3703
23		d and build											N/A		N/.
24		•	escribe			Receivable					)		2133)		535
25	Tot	al assets .											50009	25	4239
26		al liabilities									)			26	
27	Not	accate or	fund h	halan	coe (line 2	7 of column	(R) mu	et agraa	with line O	11\			.0000	07	4220

COIII	990-62 (2009)					Page Z
Par	t III Statement of Program Service Accom	plishments (See the instr	uctions for Part II	1.)		Expenses
Wha	t is the organization's primary exempt purpose?	Trade Assoc. to Promote &	Educate the FIBC In	ndustry		ured for section
	cribe what was achieved in carrying out the org	janization's exempt purpo	ses. In a clear ar	nd concise		c)(3) and 501(c)(4)
	ner, describe the services provided, the number of					nizations and section (a)(1) trusts, optional
each	program title					hers)
28	National Meetings / Conferences - The flexible intern	nediate bulk container assoc	iation (FIBCA) hold	S		· · ·
	two national meetings a year which bring together F		···			
	of services to the FIBC industry. FIBCA has 57 mem	·				
		includes foreign grants, ch		▶ □	28a	
29	The national meetings consist of informative speake		CONTION :	· · ·		
23	committee work sessions where members and staff		afety			
	and the welfare of the FIBC industry					
		includes foreign grants, ch	ock horo	▶ □	29a	
30	Publications and Videos - Materials are developed to				236	
30	benefits of FIBCs, safe handling posters, terminolog			dling		
	label formats, recycling and educational bulletins on			dirig		
		includes foreign grants, ch			30a	
21	Other program services (attach schedule)		eck riere .		300	
31	the state of the s	includes foreign grants, ch	ook boro		31a	
32	Total program service expenses (add lines 28a		eck nere	· •	32	
Par	<u>' ' '</u>	<u> </u>	ven if not compensa	ted (See the		tions for Part IV )
	Elot of Officerol, Directors, 11 detects, and 10	(b) Title and average	(c) Compensation	(d) Contribution		(e) Expense
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred compe	t plans &	account and other allowances
Lowi	s Anderson	devoted to position	enter -0,	deferred compe	il SallOil	Other allowances
	Xerxes Avenue South, Minneapolis, MN 55410	Executive Director (40 Hrs)	70160		0	0
	Ellen Henry		70100			
	Hwy 90 W, PO Box 1566, Crowley, LA 70527	President (3 Hrs)	o		0	0
	Schnaars					•
	South Long Street, Lafayette, LA 70506	Vice President (3 Hrs)	o		0	0
	y Finley			·		•
	0 Data Drive, Dallas, TX 75218	Treasurer (3 Hrs)	o		0	o
	e Russell					
	Weatherstone Lane, Suite #2, Elgin, IL 60123	Secretary (3 Hrs)	o		0	0
	Troumerotions Lane, Cane i.e., Eight, i.e. co.t.c.			•		
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Form 99	0-EZ (2009)		Р	age 3
Part	V Other Information (Note the statement requirements in the instructions for Part V.)			
00	Did the supplication appears in the sale of the sale o		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
ь 36	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	35b 36		]
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0	<u> </u>		اـرا
ь 38а	Did the organization file <b>Form 1120-POL</b> for this year?	37b 38a		/
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on line 9			į
a b	Initiation fees and capital contributions included on line 9			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			and to the
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e		<b>-</b>
41	List the states with which a copy of this return is filed. ▶ Georgia, Minnesota			
42a			0-8880 -1420	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		<b>.</b>	
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	NO ./
	If "Yes," enter the name of the foreign country: ▶	720		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		<u>√</u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041 –</b> Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. !	<b>▶</b> ∐
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		Yes	No
	Form 990-EZ	44		1
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		<b>✓</b>
	r	- 000	\_E7	(2009)

Part VI

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 ar	section 4947(a)( 17(a)(1) nonexem nd 51.	1) nonexen pt charitabl	npt charita le trusts m	<b>ible trusts only.</b> A ust answer questio	ll sec ns 46	tion 5–49l	 ɔ
	Did the organization engage in direct or indirect			n behalf of	or in opposition to		Yes	No
	candidates for public office? If "Yes," complete					46		<b>✓</b>
	Did the organization engage in lobbying activities					47		<b>✓</b>
	Is the organization a school as described in section					48		<b>✓</b>
	Did the organization make any transfers to an ex	-		-		49a		_
	If "Yes," was the related organization a section 5					49b		
	Complete this table for the organization's five hi employees) who each received more than \$100,							
	(a) Name and address of each employee paid more than \$100,000	(b) Title and aver hours per wee devoted to posit	rage (c)	Compensatio		(e) ac	Expen count a	ise ind
None	than \$100,000	devoted to posi-	lion	-	deterred compensation	Other	allowa	nces_
f	Total number of other employees paid over \$100	).000						
	\$100,000 of compensation from the organizatio  (a) Name and address of each independent contractor				Type of service	(a) Cor	npensa	ation.
None	(a) Name and address of each independent contractor	paid more man \$100,00		(0)	Type of service	(0) 001	iipeiisa	
140116								
	• • •				-			
· • • • • • • • • • • • • • • • • • • •								
		<u> </u>						
d	Total number of other independent centractors	ach recovers over	£100.000					
u	Total number of other independent contractors e	ach receiving over	φ100,000	▶				
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration	ed this return, including of preparer (other than	accompanying s officer) is based	schedules and s on all informati	statements, and to the bes on of which preparer has a	t of my	knowle	 ∍dge e
Cia-		,			-1-1			
Sign Here	Must of these				15/8/10			
nere	Agnature of officer				Date			
	Lewis Anderson, Executive Director							
	Type or print name and title	<del> </del>			Ta			
Paid	Preparer's		Date	Check if self-	Preparer's identifying num	iber (Se	e instruc	tions)
Prepare	signature Firm's name (or			employed ▶				
Use On	yours if self-employed),		· · · ·		EIN ►			
May the	address, and ZIP + 4 e IRS discuss this return with the preparer shown	ahove? See instri	ictions		Phone no ▶	Voc		
widy tile	on to discuss this retain with the preparer shown	, above . Ose matri		· · · ·	For	<u>Yes</u> m <b>99</b> 0		(2009)

#### 990-EZ (Attachment 1 - Other Expenses)

#### 2009 Tax Year

# Flexible Intermediate Bulk Container Association, Inc. EIN # 75-2374070

Part I: Revenue, Expenses and Changes in Net Assets or Fund Balances

Line 16: Other Expenses

рe	ns	

tal Expense	47,474.18
Web Site Hosting & Domain Names	448.94
Travel Expenses for Exec. VP	6,302.10
Total Supplies	2,170.08
Software	181 49
Office / Meeting Supplies	1,024 87
Equipment	858 13
Checks & Deposit Slips (QB.com)	105 59
<u>Supplies</u>	
Total Meeting Expenses	29,514.78
Meeting (C) Expenses Reimbursed	-15,370 54
Meeting (B) Prepaid Expenses	10,000 00
Meeting (A) Expenses	34,885 32
Meeting Expenses	
Total Insurance	2,715.00
Liability Insurance	1,814 00
Commercial & Umbrella	901 00
<u>Insurance</u>	
Total Dues, Subscriptions & Fees	1,296.11
Web Based Services	185 00
Trade Associations	175 00
Publications	471 41
PO Box Rental & Forwarding	60 00
Incorp Fees -State Registration	55 00
Incorp Fees -Addess (CSC)	349 70
Dues, Subscriptions & Fees	
Total Communication Costs	4,522.63
WebEx Service	517 00
Mobile Phone	2,218 30
Internet & Email Access	635 40
Fax	143 40
Email Distribution Service	168 00
866 Line	840 53
Communication Costs	
Total Bank Fees	504.54
Credit Card & PayPal Fees	164 15
Bank & Wire Fees (B) Reimbursed	-25 50
Bank & Wire Fees (A) Charges	365 89