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DLN: 93492137034196

OMB No 1545-1150

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public

Intern	al Reven	ue Service							
			r year, or tax year beginning 01-01-2015	, and ending	12-31-2	015			
	Check i dress o	f applicable :hange	C Name of organization FLORIDA RECYCLERS ASSOCIATION INC				D Emplo	yer ider	ntification number
	ame change nitial return		Number and street (or D. O. hou, if made a not delivere		D = = == /=	L_	26-374		
Fır	nal retu	rn/terminated	Number and street (or P O box, if mail is not delivered PO BOX 1585	i to street address) i	ROOM/Su	ie	E Telepho	ne numb	er
□Amended return □Application pending								(863) 6	65-7157
			City or town, state or province, country, and ZIP or fore LAKELAND, FL 33802	ign postal code			F Group E		า
			LAKLIMIU, IL 33002				Numbe	r 🟴	
						U. Chaak b			
GΑ	ccour	nting Method	「Cash 反Accrual Other(specify) ►				l to attach		zation is not ule B
		_			·	(Form 9	90,990-E	Z, or 9	90-PF)
		-	DARECYCLERSASSOCIATION ORG		-]				
J Ta	x-exer	npt status(check	only one) -┌501(c)(3)┌ 501(c)(6) ◀(Insert no)┌ 4947	(a)(1) or ┌ 527					
		=	□Corporation □Trust □Association □Other						
			7b to line 9 to determine gross receipts If gross 0 or more, file Form 990 instead of Form 990-E2		200,000	or more, or		sets (Pa 1.300	art II, column
	art I		e, Expenses, and Changes in Net Asse		alance	S (see the u	'		
	41 t I		e organization used Schedule O to respond to ar						
	1							1	46,000
	2	Program serv	ice revenue including government fees and conti	racts				2	15,300
	3	Membership o	dues and assessments					3	_
	4	Investment in	ncome					4	
	5a	Gross amount	t from sale of assets other than inventory			5a			
a	b		other basis and sales expenses			5b			
Revenue	c		from sale of assets other than inventory (Subtra	act line 5h from l	ine 5a)			5c	
Ş	_		undraising events	ice iiiie 35 ii oiii i	illic Su)		• •	<i>J</i> C	
<u> </u>	6	_		#1F 000)		İ			
	а	Gross income	e from gaming (attach Schedule G if greater than	\$15,000)	•	6a			
	b		from fundraising events (not including \$		ibutions				
			ng events reported on line 1) (attach Schedule (pross income and contributions exceeds \$15,00			cr			
	_	-		0)		6b			
	С.		expenses from gaming and fundraising events		• • •	6c	. \		
	d _		r (loss) from gaming and fundraising events (add	lines 6a and 6b	and su	1	:)	6d	
	7a		of inventory, less returns and allowances			7a			
	Ь	Less cost of			• • •	7b			
	С		r (loss) from sales of inventory (Subtract line 7b					7c	
	8		e (describe in Schedule O)					8	
	9	Total revenue	Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				<u> </u>	9	61,300
	10	Grants and si	milar amounts paid (list in Schedule O)					10	15,000
	11	Benefits paid	to or for members					11	
	12	Salaries, othe	er compensation, and employee benefits					12	
ر د د	13	Professional f	fees and other payments to independent contrac	tors				13	11,256
ens	14	Occupancy, r	ent, utilities, and maintenance					14	
Expenses	15	Printing, publi	ications, postage, and shipping					15	
_	16	O ther expens	es (describe in Schedule O)					16	16,041
	17	Total expense	es. Add lines 10 through 16				•	17	42,297
,	18		eficit) for the year (Subtract line 17 from line 9)					18	19,003
etAssets	19		fund balances at beginning of year (from line 27						<u> </u>
ধ			gure reported on prior year's return)			-··		19	27,493
Net	20		s in net assets or fund balances (explain in Sch	edule O)				20	19
_		_	fund balances at end of year Combine lines 18	•			•	\vdash	46,515
	21	iver assets 01	rand parances at end of year Combine lines 16	anough 20 .				21	40,515

Part II Balance Sheets (see the instruc					Page 2
Check if the organization used Sched	dule O to respond to a	ny question in this Pa	rt II		
		(A)	Beginning of year		(B) End of year
22 Cash, savings, and investments			27,512		46,515
23 Land and buildings			0	23	
4 Other assets (describe in Schedule O) 5 Total assets			27,512		46,515
26 Total liabilities (describe in Schedule O)			19	 	40,515
7 Net assets or fund balances (line 27 of colum	nn (B) must agree with	line 21)	27,493	-	46,515
Part IIII Statement of Program Servi Check if the organization used Scher					Expenses equired for section 501
what is the organization's primary exempt purpose LORIDA RECYCLERS ASSOCIATION IS AN OUTHER OF FLORIDA THE PURPOSE OF THE OUTHER OF COMMUNICATE WITH ONE ANOTHER, SHAPE ANOTHER ABOUT LEGISLATION, AND FIRE CYCLING INDUSTRY THE ORGANIZATION WICE A YEAR DURING EACH MEETING, THE ECYCLING, ESPECIALLY RELATED TO LEGIS GENERALLY FOCUSES ON TWO ASPECTS (1) GROWTH OF THE MEMBERS OF COMMUNICATION OF THE MEMBERS OF COMMUNICATION OF THE MEMBERS OF COMMUNICATION OF COMMUNICA	RGANIZATION OF S RGANIZATION IS TO ARE INFORMATION A GHT LAWS WRITTEN CONSISTS OF ONE MEMBERS DISCUSS ELATION DURING TH INDUSTRY RELATED OMPHISHMENTS for each	D UNITE SCRAP MET ABOUT THE INDUST I TO HINDER THE SC GROUP OF MEMBER: FAREAS AFFECTING HE MEETINGS, THE C D INFORMATION, AN	AL RECYCLERS RY, EDUCATE RAP METAL SHIP THAT MEETS SCRAP METAL PRGANIZATION D (2) PERSONAL	org	i(3) and 501(c)(4) ganizations, optional for ners)
HE SCRAP RECYCLING INDUSTRY ACCOUNT CRAP RECYCLING INDUSTRY ANNUALLY TR ATERIALS FROM CONSUMERS, BUSINESSES ECYCLED MATERIALS VS VIRGIN ORE AVER LORIDA RECYCLERS ASSOCIATION ARE CO TEWARDSHIP 2 OBEYING ALL LAWS-FEDER, NFORCEMENT ON METAL THEFT ISSUES 4 S NVOLVEMENT 6 POLITICAL INVOLVEMENT MPACT OUR BUSINESSES WE ARE INVOLVE RE SELF POLICED AND MONITOR OUR BUSI	ANSFORMS MORE THE AND MANUFACTUR RAGES 85% SAVED IMMITTED TO THE FOAL, STATE AND LOCATE WORKPLACE EN WE, AS MEMBERS, STOTIN THE LEGISLATINESS ENVIRONMEN	HAN 150 MILLION TO LERS INTO USEFUL R IN ENERGY THE MEI DLLOWING 1 ENVIR AL 3 COOPERATING IVIRONMENT 5 COM FAY ABREAST OF TH IVE PROCESSES OF T THROUGHOUT TH	ONS OF OBSOLETE AW MATERIALS IBERS OF THE ONMENTAL WITH LAW MUNITY E LAWS THAT THESE LAWS WE E STATE		
Grants \$ 0) If this amou 9	unt ıncludes foreıgn gr	ants, check here .	► <u> </u>	28a	0
Grants \$) If this amou	unt ıncludes foreıgn gr	ants, check here .	▶ ┌	29a	
0			,	1	
Grants \$) If this amou	unt ıncludes foreıgn gr	ants, check here .	▶ ┌	30a	
1 Other program services (describe in Schedule		·	'		
	unt ıncludes foreıgn gr		<u>'</u>	31a	
2 Total program service expenses (add lines 28a				32	and for Port BA
art IV List of Officers, Directors, Trustees, Check if the organization used Scheo					
(a) Name and title	(b) A verage hours per week devoted to position	(c)Reportable compensation (Forms W-2/1099- MISC) (if not paid, enter -0-)	(d) Health bene contributions employee benefit and deferred compensatio	to plans I	(e) Estimated amount , of other compensation
OSE MOCK RESIDENT	1 00	0		0	0
OB WEBBER ICE PRESIDENT	1 00	0		0	0
OHN BIANCULLI ECRETARY	1 00	0		0	0
AMES BUGG REASURER	1 00	0		0	0

Form	990-EZ (2015)			Page :
Pa	ort V Other Information (Note the Schedule A and personal benefit contract statement requirement)	ents i	n the	
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part $^{ m V}$	<u>v</u>	<u></u>	<u>r</u>
	-		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy	33		INO
J -	of the amended documents if they reflect a change to the organization's name Otherwise, explain the change	24		N
	on Schedule O (see instructions)	34		No
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2,6a, and 7a, among others)?	35a		No
ь	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O			
c				
	notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 🕏	35c	Yes	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions • 37a 15,000			
b	Did the organization file Form 1120-POL for this year?	37b		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Νo
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations Enter			
	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
b	section 4911, section 4912, section 4915, section 4915, section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that			
c	has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization	40b		
d	managers or disqualified persons during the year under sections4912, 4955, and 4958 Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		No
41	List the states with which a copy of this return is filed 🕨			
42a	· · · · · · · · · · · · · · · · · · ·			-7157
	Located at 2404 LAKE ARIANA BLVD AUBURNDALE, FL ZIP + 4	• <u>33</u>	823	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		No
	If "Yes," enter the name of the foreign country 🕨			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
c	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		No
-	If "Yes," enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		. ▶ ┌	
	and enter the amount of tax-exempt interest received or accrued during the tax year			
				No.
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of		Yes	No
-1-1 d	Form 990-EZ	44a		No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed			
	Instead of Form 990-EZ	44b		No
С	Did the organization receive any payments for indoor tanning services during the year?	44c		Νo
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? <i>If "No," provide an</i>	774		
1 5-	explanation in Schedule O	44d 45a		No
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	-13d		NU
- 1 JU	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		

Form	990-EZ	(2015)							Page 4
								Yes	No
46		organization engage, directly or indi							
	candidat	es for public office? If "Yes," compl	ete Schedule C, Part	I 182	• •		46	Yes	
Par		Section 501(c)(3) organizat All section 501(c)(3) organization and 51	-	uestions 47-49b ai	nd 52,	and complete	the table	s for lu	nes 50
		Check if the organization used Sche	dule O to respond to	any question in this F	art VI	<u> </u>	<u></u>		Γ
								Yes	No
47		organization engage in lobbying acti complete Schedule C, Part II	vities or have a secti	on 501(h) election in	effect	during the tax ye	ear? 47		
48	Is the or	ganızatıon a school as described ın	section 170(b)(1)(A)(ıı)? If "Yes," compl	ete Sch	edule E	48		
49a	Did the o	organization make any transfers to a	an exempt non-charit	able related organiza	tion?		49a		
Ь	If "Yes."	was the related organization a sect	tion 527 organization	?			49b		
50	•	e this table for the organization's fiv	_			ficers directors	trustaas	and key	<u> </u>
		es) who each received more than \$							
	(a) Nan	ne and title of each employee	(b) A verage hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099- MISC)	` () Health benefit: contributions to loyee benefit pla and deferred compensation		stimated of othe ompense	
f	Total n	umber of other employees paid ove	r\$100,000 .				▶		
	C l - t	a blood hall a Combba a communication of a Combba							0.000
51		e this table for the organization's fivensation from the organization. If th			ractors	wno each receiv	rea more tr	nan \$10	0,000
		(a) Name and business address of	each independent cor	ntractor	(b) ⊺	ype of service	(c) Com	pensati	on
d	Total n	umber of other independent contrac	ctors each receiving o	ver\$100,000			-		
52		e organization complete Schedule A eted Schedule A	? NOTE. All Section 5	501(c)(3) organizatio	ns mus	t attach a		□v ₄	s 「No
		ecca belledate //							.5 , 110
now		of perjury, I declare that I have exami belief, it is true, correct, and complete							
	l L					<u> </u>			
Sign	, ⊪	****** Signature of officer				2016-05-05 Date			
Here	I .	ROSE MOCK PRESIDENT							
	<u> </u>	Type or print name and title							
Dai:	1	Print/Type preparer's name JEFREY R WALKER	Preparer's signature	Dat 201	e 6-05-02		TIN 00489176		
Paid Pre	a parer	Firm's name	EN LLP			Firm's EIN 🕨 41-0	746749		
	Only	Firm's address ► 402 SOUTH KENTUCK	KY AVENUE SUITE 600			Phone no (863) 6	580-5600		
		LAKELAND, FL 33801							
Mavi	the IRS d	iscuss this return with the preparer	shown above? See in	structions			ਾ ⊽Yes	⊏No.	

DLN: 93492137034196

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

OMB No 1545-0047

www.irs.gov/form990. Inspection

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

For Organizations Exempt From Income Tax Under section 501(c) and section 527

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
FLORIDA RECYCLERS ASSOCIATION INC	
	26-3749008

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	

Political expenditures

Volunteer hours

Pai	t I-B	Complete if the organization is exempt under section 501(c)(3).		
1	Enter	the amount of any excise tax incurred by the organization under section 4955	\$_	
2	Enter	the amount of any excise tax incurred by organization managers under section 4955	\$ _	

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

☐ Yes ☐ No

Was a correction made?

☐ Yes ☐ No

If "Yes," describe in Part IV

art I-C	Complete if the	e organization is	exempt under	section 501(c), e	except section	501(c)(3).

Enter the amount directly expended by the filing organization for section 527 exempt function activities \$	
---	--

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

15,000 15,000

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Did the filing organization file Form 1120-POL for this year?

☐ Yes ✓ No

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) FLORIDA RECYCLERS ASSOCIATION INC CCE	1430 DOLGNER STREET SANFORD,FL 32771	27-0559429	15,000	
2				
3				
4				
5				
6				

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ. Cat No 50084S Schedule C (Form 990 or 990-EZ) 2015

ochedule C (I	01111 330 01 330 12/2013	Page
Part II-A	Complete if the organization is exempt under section 501(c)(3) an	d filed Form 5768 (election
	under section 501(h)).	

A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Filing organization's	(b) Affiliated
(The term "expenditures" means amounts paid or incu	ırred.)	totals	group totals

Total lobbying expenditures to influence public opinion (grass roots

1a lobbying)

- $oldsymbol{b}$ Total lobbying expenditures to influence a legislative body (direct lobbying)
- Total lobbying expenditures (add lines 1a and 1b)
- $oldsymbol{d}$ O ther exempt purpose expenditures
- Total exempt purpose expenditures (add lines 1c and 1d) ${f e}$

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

Subtract line 1f from line 1c If zero or less, enter -0-

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

┌ Yes ┌ No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

For each "Yes" i activity.	filed Form 5768 (election under section 501(h)).		(a)	(b)
	esponse on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		No	Amount
legislati	ne year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or referendum, the use of	Yes		
a Volunteers?			•	
I	I			
b Paid sta	f or management (include compensation in expenses reported on lines 1c through 1i)?]
c Media advertis	aments?	'		
riedia advertis 	I			
d	<u>L</u>			
Mailings to me	mbers, legislators, or the public?			
e Publicat	ons, or published or broadcast statements?			
f Grants t	o other organizations for lobbying purposes?			
				'
g Directic	ontact with legislators, their staffs, government officials, or a legislative body?			
h Rallies,	demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i O ther activitie	s?			
I	I			
j Total Addline	s 1c through 1ı			
	activities in line 1 cause the organization to be not described in section 501(c)(3)?			1
	enter the amount of any tax incurred under section 4912			L
	enter the amount of any tax incurred by organization managers under section 4912		1	L
Part III-A	ng organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section		a)/F)	l costion
Part III-A	501(c)(6).	11 201(c)(5),	
1 Were su	ostantially all (90% or more) dues received nondeductible by members?			Yes No 1 No
2 Did the	organization make only in-house lobbying expenditures of \$2,000 or less?			2 No
3 Did the o	rganization agree to carry over lobbying and political expenditures from the prior year?			3 Yes
Part III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."			
1 Dues assessr	nents and similar amounts from members			
1	46,000			
2 Section	162(e) nondeductible lobbying and political expenditures (do not include amounts of political s for which the section 527(f) tax was paid).			
a	, 16. 11. 11. 2001 61. 22. (1.) tax 11. 12. paid,	'	•	
Current year				
	15,000			
2a b	last year			
2a b Carryover fron				
2b	6,010			
2b	6,010			
2b c C Total	21,010			
2b c C Total		3	1	36,800
2b c Total 2c 3 Aggrega 4 If notices were does the organ	21,010	_ 3	l	36,800
2b c Total 2c 3 Aggrega 4 If notices were does the organ	21,010 te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess ization agree to carryover to the reasonable estimate of nondeductible lobbying and	3	1	36,800
c Total 2c 3 Aggrega 4 If notices were does the organ political expen	21,010 te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess ization agree to carryover to the reasonable estimate of nondeductible lobbying and diture next year?		1	36,800
zb c Total 2c 3 Aggrega 4 If notices were does the organ political expen	21,010 te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess ization agree to carryover to the reasonable estimate of nondeductible lobbying and diture next year? amount of lobbying and political expenditures (see instructions)	5	<u> </u>	36,800 -15,790
2b c Total 2c 3 Aggrega 4 If notices were does the organ political expenies and the control of the cont	21,010 te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess ization agree to carryover to the reasonable estimate of nondeductible lobbying and diture next year?	5		-15,790

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Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

SCHEDULE O (Form 990 or 990-EZ)

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

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
FLORIDA RECYCLERS ASSOCIATION INC	
	26-3749008

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 10 - PAYMENTS TO AFFILIATES	AFFILIATE NAME FLORIDA RECYCLERS ASSOCIATION INC CCE PURPOSE OF PAYMENT PAC CONTRIBUTION AMOUNT OF PAYMENT 15,000
FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES	DESCRIPTION ADVERTISING AMOUNT 934 DESCRIPTION MEETING EXPENSES AMOUNT 11,231 DESC RIPTION BUSINESS LICENSES & PERMITS AMOUNT 61 DESCRIPTION PENALTY AMOUNT 300 DESCR IPTION MEALS & ENTERTAINMENT AMOUNT 3,515 TOTAL TO FORM 990-EZ, LINE 16 16,041
FORM 990-EZ, PART I, LINE 20 - OTHER CHANGES IN NET ASSETS	DESCRIPTION PRIOR YEAR ACCOUNTS PAYABLE AMOUNT 19
FORM 990-EZ, PART II, LINE 26 - OTHER LIABILITIES	DESCRIPTION ACCOUNTS PAYABLE BEG OF YEAR AMOUNT 19 END OF YEAR AMOUNT 0