Preparer

Use Only

Firm's name

Firm's address ▶

* ,	, 	_	1				ı	L 0000 0 4545 0045
Form	99	0	Return of (Organization Exem	pt From	Income Ta	ax	OMB No 1545-0047
			Under section 501(c), 527	, or 4947(a)(1) of the Internal Re	venue Code (except private fo	oundations)	2018
D		L - T	i e	ocial security numbers on this				Open to Public
Intern	tment of t al Revenu	he Treasury e Service	► Go to www.	irs.gov/Form990 for instructio	ns and the lat	est information.		Inspection
A	or the	2018 caler	ıdar year, or tax year begin	ning January 1	, 2018, and e	nding Dece	mber 31	, 20 ₁₈
В	Check if a	pplicable	C Name of organization Flexible	e Intermediate Bulk Container	Association,	Inc.	D Employer	identification number
	Address o	hange	Doing business as	71	. 1=			75-2374070
ַ וַ	Name cha	_	· /	of mail is not delivered to street add	ress) Roo	m/suite	E Telephone	
_	nıtıal retu		C/O Corporation Service Co	 5., 40 Technology Pkwy S. country, and ZIP or foreign postal c 		300	9	52-412-8867
=		/terminated		country, and ZIP or foreign postal c	ode		G Gross reco	2010 E 202 CA
	Amended		Norcross, GA 30092 F Name and address of principal	officer Lewis Anderson		LU/s) In this or		eipts \$ 362,64 pordinates? Yes No
ш,	Applicatio		PO Box 241894, Saint Paul,					ncluded? Yes No
	Tay-ayam	pt status			(a)(1) or 5			st (see instructions)
	Nebsite:	•	r.fibca.org	1(c) (0) 1 (moore no) = 1-0-1	UNIT U	H(c) Group	exemption n	umber ▶
				sociation ☐ Other ►	L Year of fo			legal domicile GA
Pa	irt I	Summa	ary					
	1	Briefly de	scribe the organization's i	mission or most significant a	ctivities: To	educate the FIB	C / Bulk Ba	g industry and
9	9	end users	about regulations, industry	y standards, safe handling and	benefits of u	se.		
Пап	_							
Activities & Governance				tion discontinued its operation		ed of more tha		s net assets.
Ğ	3	Number c	f voting members of the	governing body (Part V), line	10)	30.	3	
80	4 1	Number c	it independent voting mer	mbers of the governing body	APR 25		5	
žį			iber of individuals employ iber of volunteers (estima	ed in calendar year 20 6 (Pa	rt·v; iine-za)		6	
ŧ					12		7a	
`	ا b.	Net unrela	ated business taxable inco	om Part VIII, column (C), line ome from Form 990-T, <u>line 3</u>	ÖGDEN	<u>v. UI · · · · · · · · · · · · · · · · · · </u>	7b	
		101 0111 011				Prior Y	ear	Current Year
	8 (Contribut	ons and grants (Part VIII,	line 1h)			O	(
Ž	9 1	Program :	service revenue (Part VIII,	line 2g)			347,446	360,16
Revenue				nn (A), lines 3, 4, and 7d) .			36	4
-			•	, lines 5, 6d, 8c, 9c, 10c, and			8,047	2,43
_				11 (must equal Part VIII, colur		2)	355,529	362,64
				art IX, column (A), lines 1-3)		٠	0	
			paid to or for members (Pa		A\ lince 5 10	; 	122.406	140.27
Ses			•	yee benefits (Part IX, column (IX, column (A), Iine 11e) .	A), lines 5–10	' 	132,496	140,37
e e			raising expenses (Part IX			· 124 4 11574 4	4 14 707 00	The morning to the thing
Expe			• • •), lines 11a-11d, 11f-24e)			214,592	204,01
				nust equal Part IX, column (A), line 25)		347,088	344,38
		-	less expenses. Subtract li				8,441	18,26
5 %						Beginning of C	urrent Year	End of Year
Net Assets or Fund Balances	20	Total asse	ets (Part X, line 16)				114,525	136,54
ag A							12,370	16,13
			s or fund balances. Subtr	act line 21 from line 20 .	<u> </u>	.	102,155	120,41
	rt II		ure Block			 		
Und true	ler penalt	es of perjur	y, I declare that I have examined to Declaration of preparer (other	this return, including accompanying r than officer) is based on all informa	schedules and tion of which pre	statements, and to parer has anv knov	tne best of my rledge	knowledge and belief, it
	, 23., 33.,	<u> </u>	1111				4/17/201	Q
Sig	n I	Signa	iture of officer				ate	
He			wis Anderson, Exec	cutive Director				
			or print name and title				" "	
Pai	id	Print/Typ	e preparer's name	Preparer's signature		Date	Check	l if PTIN
Per		.1					self-emple	

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Firm's EIN ▶

Phone no

Yes No
Form 990 (2018)

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Part	· · · · · · · · · · · · · · · · · · ·	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	FIBCA's Mission Is To: - Motivate customers to use FIBCs to maximize their profitability, safety, and sustainability; and,	
	- Educate its members about regulations and standards, promote the use of their products, and to be a strong voice for the	
	FIBC industry with regulatory agencies around the world.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measur	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	thers,
	the total expenses, and revenue, if any, for each program service reported.	
4-	(O-d	
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
	National Meetings / Conferences - The flexible intermediate bulk container association (FIBCA) holds	
	two national meetings a year which bring together FIBC manufacturers, distributors and suppliers of services to the FIBC industry. FIBCA has 105 member companies located around the world.	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
	The national meetings consist of informative speakers, educational forums and	
	committee work sessions where members and staff address issues to enhance safety	
	and the welfare of the FIBC industry.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
	Publications and Videos - Materials are developed to educate members and end users on the	
	benefits of FIBCs, safe handling guidelines, terminology, correct customs tariff classification, safe handling,	
	label formats, buyers guide, recycling and educational bulletins on regulatory and industry developments.	
		-
		-
A -1	Other program convece (Departhe in Schedule O.)	
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ►	
70	Total program dol 100 expended a	

Form **990** (2018)

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Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see Instructions)?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	✓	
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		✓
þ	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	ļ	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		/

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Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23_		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		
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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
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		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		1
С	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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓_
b	If "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		
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		1
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	1	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
•	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	ing watering	Yes Print 4	No
2 a	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	عستحلقه الآب	Z
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		24.7	1 1255 1 1255
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	.		,
L	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	[P](T) }	√ -35580
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			,
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<u>✓</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or qifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7.15	3	1224
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		W.t.	W
_	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
a	required to file Form 8282?	7c	Ųį,	NEC GEO
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Tan.	S. VALE
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	bhtt. t	td r.J.nched
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
9	sponsoring organization have excess business holdings at any time during the year?	8		500g
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		الشسس
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			湖間
a	Initiation fees and capital contributions included on Part VIII, line 12		(1) (2) (4) (4)	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]		3.5	
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them.)		*** ·	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	4614.	water aread
ь	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. Is the organization licensed to issue qualified health plans in more than one state?	13a	Re Tr	O-E
а	Note. See the instructions for additional information the organization must report on Schedule O. ~	100	i	് എ
b	Enter the amount of reserves the organization is required to maintain by the states in which		Eg, i in Startin	i Hiji i ji ² il
_	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand		1117	芸芸園
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.	$\overline{}$	\$6.7°	°.eXI.a
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			提供
		Forn	990	(2018)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	. 🗸
<u>Secti</u>	on A. Governing Body and Management			,
		Evi	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	3	1002	141
	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		27 S.	
	committee, explain in Schedule O.		\mathbb{H}_{0}	
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	400 m		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct			١.
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6	✓	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	✓	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	FC16.	27.2	14:23
а	The governing body?	8a	✓	
ь	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, 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	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	nue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
, b	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	EK.	hidd.	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	************	✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by	500 J		
а	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	<u> 182663 </u> -	.2353
b	Other officers or key employees of the organization	15b	•	
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	NXY 生	THE P	145,55
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	depend ye	125 v	
	with a taxable entity during the year?	16a	gacs)	2002**
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	40 m	,	4.5
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		244
Socti	on C. Disclosure	100		l
17				
	List the states with which a copy of this Form 990 is required to be filed Georgia, Minnesota	T (C -	4! _ · · · ·	7047-1
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)	ı (Sec	tion :	oU1(C)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	terest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	>	
	Flexible Intermediate Bulk Container Association, PO Box 241894, Saint Paul, MN 55124, 952-412-8867			

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ated any currer	t officer, directo	r, or trustee
					C)					
(A)	(B)		-4 -1		ition			(D)	(E)	(F)
Name and Title	Average					e than o		Reportable	Reportable	Estimated
	hours per					or/trus		compensation	compensation from	amount of
	week (list any hours for	유	Ins	₹	X _e	a F	75	from the	related organizations	other compensation
	related	Individual trustee or director	효	Officer	Key employee	Ples	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	함	ions		횽	9 c	-	(W-2/1099-MISC)		organization and related
	line)	l IS	5		yee	# # # # # # # # # # # # # # # # # # #				organizations
		l e	Institutional trustee			Highest compensated employee				
				_		ted.	_			
(1) Lewis Anderson	30 0									
Executive Director	<u> </u>	1		✓				140,370	o	0
(2) Philippe Combier	3.0							,		
President	1	✓		✓				0	0	0
(3) Douglas Savoy	3.0									
Vice President		✓		✓				0	0	0
(4) Albert Coiby	3.0									
Treasurer		✓		✓				0	0	0
(5) Danny Hoch	3.0									
Secretary		✓		✓				0	0	0
(6) Steve Russell	3.0									
Board Member	ļ	✓				L		0	0	0
(7) Nancy Cline	3.0									
Board Member		✓						0	0	0
(8) Jay Todd	3.0									
Board Member		✓						0	0	0
(9) Justin Murphy	3.0									
Board Member		/	L	_	<u> </u>	_	_	0	0	0
(10) Michael Owens	3.0			İ		ĺ				
Board Member		✓					_	0	0	0
(11)			•							
(12)	 									
(13)						-				
(14)	 			-						<u> </u>
	L	l			1	l		l		

	(A) Name and title		Position (do not check more to box, unless person is officer and a directory)					an tee)	compensation	(E) Reportable compensation froi				
	•	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	,	fro orga and	ensation the nization related in its attention in its att	on d
(15)														
(16)														
(17)								-						
(18)														
(19)										-		•		-
(20)														
(21)														
(22)														
(23)					-									
(24)														
(25)														
1b c	Sub-total	VII, Sectio	n A		•		•	>	140,370		0			0
d								>	140,370	ero than \$100 (0	•		0
	reportable compensation from the organi		10 11		1150	eu (5) VV	viio received inc	The than \$100,0		· 		
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5									est compensa	ted	3	Yes	No 🗸
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of reparted such	portal	ole d	com	per	nsatio	n a	and other comp			4		· ·
5	Did any person listed on line 1a receive of for services rendered to the organization?	r accrue co										5		1
Section 1	on B. Independent Contractors Complete this table for your five highest of compensation from the organization. Rep													hax
	year.													
	(A) Name and business add								(B) Description of se	ervices	Co	(C) mpens		
Lewis	Anderson, PO Box 240514, Saint Paul, MN 5	5124	•					1	ecutive Director ssociation Mana	qement)			1	40,370
								_						
2	Total number of independent contractor received more than \$100,000 of compens							L th	nose listed abo	ve) who				

-Pari	EVIII	Statement of Reve			K !- 4) !	a Dank VIII		_
		Check if Schedule C		esponse or note t	o any, line in this (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	· 1a	Federated campaigns	_	_	appare appared		THE REEL PROPERTY.	al de la companya de
S a	b		<u>1</u> 1		anta indianapolina shanot Cha			
ts,	C	Fundraising events .			ANIMA DA SA			
	d	Related organizations		+				
ns, Ein	e	Government grants (cor		e	erio de la caración d		5 10 T	
ē ģ	1	All other contributions, g and similar amounts not inc						
ë ₽						and the second second		
<u> </u>	9	Noncash contributions includ		5				
	h	Total. Add lines 1a-1	1	Business Code				
Ž	2a	Membership Dues & In	itiation Foos			202.702		
ě	b	Program Fees & Spons		900099	262,792		i .	
8		Program rees & Spons		- 900099	97,371	97,371	- · ·	
ΘŽ	ď			-				
E	e			-	.=			
Program Service Revenue	f	All other program ser	vice revenue .			,		
S.	g	Total. Add lines 2a-2	ef	•	360,163		315 <u>144</u> Nobel (18	
	3	Investment income and other similar amo		ridends, interest,	43	0	, ,	43
	4	Income from investmen	•	bond proceeds▶	,		1	
	5	Royalties					,	· ·
		•	(ı) Real	(II) Personal		273, 1882, 1911	Time to provide the state of	344 Page 14-19-16 (415) 16
	6a	Gross rents			Service of the property of the service of the servi			
	b	Less. rental expenses						
	С	Rental income or (loss)						and the second second
i	d	Net rental income or		<u> ▶</u>				
	7a	Gross amount from sales of	(i) Securities	(II) Other				
i		assets other than inventory				Ministra		
	b	Less' cost or other basis	`					
		and sales expenses .						
	1 .	Gain or (loss)						
	d	Net gain or (loss)		·, <u>· · · · · · · · · · · · · · · · · · </u>	if ashir radificili "kelalit	ic striktovizakitečnika	t. Mercik (1917) arettee (100 talente	atter (deserved) Tabletia Jak
venue	8a	Gross income from fuevents (not including \$	undraising					ender Link his som en de linksette in de Linksette in de linksette in de
Other Re		of contributions reported See Part IV, line 18		a .	in the same and the			
¥	ь	Less, direct expenses	•	b				
٠	С	Net income or (loss) f	rom fundraisir	g events . 🕨				
	9a	Gross income from ga	aming activities		Carlotte Control			and the second s
		See Part IV, line 19 .		a .				
	b	Less: direct expenses		b				actualist continue
	С	Net income or (loss) f				S- 4 1 M 41 M22 4	274 47 13 27 27 7 7 7	,
	10a	Gross sales of in		3				
		returns and allowance		a 3,464		2544		
	b	Less: cost of goods s		b 1,028				
	<u>c</u>	Net income or (loss) f			2,436	2,436	O Committed to the control of the co	Commission Commission Commission
		Miscellaneous F	Revenue .	Business Code	and the state of t	makamaga a 1100 mg 1		
	11a	***************************************		.	ļ	 	 	
	b			-			 	
	d	All other revenue .		-				
	e	Total. Add lines 11a-	 -11d			eren in the least		
	12	Total revenue See II			262.642	262 642	The second of th	I PARTITION OF THE PROPERTY OF THE PARTY OF

Part IX	State	ment of	Functiona	I Expense:	S					

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).												
Check if Schedule O contains a response or note to any line in this Part IX												
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			A PART OF THE PART								
2	Grants and other assistance to domestic individuals. See Part IV, line 22											
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16											
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	140,370										
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)											
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)											
9 10 11	Other employee benefits				,							
a b	Management	3,951										
d	Accounting	103		17/30/2014/16/14/30/2016								
e f g	Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column		電視し込みませるからなないは多数があることし、	1. 大学は特別は名はないない、しては新聞がはなる								
12	(A) amount, list line 11g expenses on Schedule O.) Advertising and promotion	17,737										
13 14	Office expenses	18,316 1,902	ì									
15 16	Royalties											
17 18	Travel	12,142										
19 20	for any federal, state, or local public officials Conferences, conventions, and meetings Interest	144,551										
21 22	Payments to affiliates											
23 24	Insurance	2,457										
,	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				anguesta, a qui se son de la companio del companio del la companio del							
a b	(A) amount, list line 24e expenses on Schedule ().) Dues, Subscriptions & Conference Fees	2,851										
c d												
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	344,380										
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 following SOP 98-2 (ASC 958-720)											

-Pa	ırt-X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	art X		<u></u> <u> </u>
			(A) Beginning of year	_	(B) End of year
	1	Cash—non-interest-bearing	18,268	_1	25,401
	2	Savings and temporary cash investments	68,736	2	73,779
1	3	Pledges and grants receivable, net		_3_	
	4	Accounts receivable, net	0	4	1,200
	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	The paper of the second
S	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	
Assets	7	Notes and loans receivable, net		7	
Asi	8	Inventories for sale or use	2,242		3,454
	9	Prepaid expenses and deferred charges	25,279		25,213
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10c	
	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	0		7,500
\dashv	16	Total assets. Add lines 1 through 15 (must equal line 34)	114,525		136,547
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue	12,370		16,130
	20	Tax-exempt bond liabilities		20	
Ì	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	withthe salienter to the form a limit	21	and cattless of the paper of th
Liabilities	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	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (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	12,370	26	16,130
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.	1657 1610 II 15-168		Transfer March
aŭ	27	Unrestricted net assets	102,155	27	120,417
Bal	28	Temporarily restricted net assets		28	
ᅙ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ध	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Z	33	Total net assets or fund balances	102,155		120,417
	34	Total liabilities and net assets/fund balances	114,525	34	136,547

Form 99	00 (2018)			Page 12
_Pari	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1		362,642
2	Total expenses (must equal Part IX, column (A), line 25)	2		344,380
3	Revenue less expenses. Subtract line 2 from line 1	3		18,262
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		102,155
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10		120,417
Part	XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		\perp
			Yes	s No
1	Accounting method used to prepare the Form 990 Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olaın in		
_	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			√
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	olled or		
	reviewed on a separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis		مانا المانا	
D	Were the organization's financial statements audited by an independent accountant?		2b	47 THE 484
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	a on a	2 377.	
	separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis			LEA
_	<u> </u>	.cmiabt	<u>diament distri</u>	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account		2c	
	If the organization changed either its oversight process or selection process during the tax year, ex		1.00	Continued 1
	Schedule O.	piaiii iii		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	1	
	the Single Audit Act and OMB Circular A-133?		3a	✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	

Form **990** (2018)

· SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

Tax) (s	see separate instructions), the		rax) (see separati	e instructions, or Form 330	-E2, Part V, line 556 (Frox)
	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III		Employer idea	ntification number
Name of organization			Linployer ide	75-2374070	
Part	le Intermediate Bulk Contair	e organization is exempt und	er section 501/	c) or is a section 527 (
1 2 3	definition of "political can Political campaign activit	f the organization's direct and in npaign activities") y expenditures (see instructions) cal campaign activities (see instruc			S
Part	I-B Complete if the	e organization is exempt und	er section 501(c)(3).	- · · · · · · · · · · · · · · · · · · ·
1 2 3 4a b	Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part		n managers under rm 4720 for this yo	section 4955	Yes No
Part		e organization is exempt und ly expended by the filing organiz			(C)(3).
2 3 4 5	Enter the amount of the 527 exempt function acti Total exempt function eline 17b Did the filing organization Enter the names, address organization made paymethe amount of political co	filing organization's funds contributities expenditures. Add lines 1 and 2	outed to other org. . Enter here and	ganizations for section on Form 1120-POL, con Form 527 political organ paid from the filing organ delivered to a separate p	Yes No Izations to which the filing ization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)	_				
(2)			_		
(3)					
(4)					
(5)					
(6)					

_	•
Page	-

Pa	art-II-A-	Complete if the organizat section 501(h)).	ion is exempt u	ınder section 50	01(c)(3) and file	d Form 5768 (ele	ection under
A	Check ▶						per's name,
В	Check ▶	If the filing organization che			•		
_			bbying Expendite			(a) Filing	(b) Affiliated
		(The term "expenditures"	means amounts	paid or incurred.)	organization's totals	group totals
_	a Total I	obbying expenditures to influen	ce public opinion	(grass roots lobby	ring)		
				e a legislative body (direct lobbying)			
	c Total I	obbying expenditures (add lines	1a and 1b) .				
	d Other	exempt purpose expenditures					
	e Total	exempt purpose expenditures (a	dd lines 1c and 1	d)			
	f Lobby	ring nontaxable amount. Ente	r the amount fr	om the following	table in both		
	colum	ns					
	If the a	mount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	t is:	人,有为 特	
	Not ove	er \$500,000	20% of the an	nount on line 1e.			
	Over \$	500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000		a Digital September 1.
	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 o	ver \$1,500,000		
		17,000,000	\$1,000,000.				
	_	roots nontaxable amount (enter	-			, , , , , , , , , , , , , , , , , , , ,	
		act line 1g from line 1a. If zero o					
		act line 1f from line 1c. If zero or					
	-	e is an amount other than ze ing section 4911 tax for this yea		1h or line 1i, did	•		Yes No
	(Son	ne organizations that made a :	section 501(h) ele	Period Under Sec ection do not hav ructions for lines	e to complete all	of the five colum	ns below.
		Lobbyi	ng Expenditures	During 4-Year Av	veraging Period	·	
	Cal	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
_;	2a Lobby	ring nontaxable amount		•			
		ving ceiling amount 5 of line 2a, column (e))					
	c Total	obbying expenditures					
	d Grass	roots nontaxable amount					
		roots ceiling amount 6 of line 2d, column (e))	A Company	las per al la company			
	f Grass	roots lobbying expenditures					

Part •	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(2	a)		(b)	
	ption of the lobbying activity.	Yes	No	Aı	mount	t
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				## - I	4 14 18 (4.5)
	Media advertisements?			1 1 1 1 1 1 1 1 1 1	<u> </u>	1 11212142
Ç	Mailings to members, legislators, or the public?					
d	Publications, or published or broadcast statements?	-				
e						
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .					
h :	•					
!	Other activities?		#2793N			
J	Total. Add lines 1c through 1	<u> </u>	المساسنة		\$5 35 V	1000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	S 286. 30	5.1 ·	2 (2000) 3 (4)	-	100
b	If "Yes," enter the amount of any tax incurred under section 4912		1,5,1			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.		91.4		See	Contract.
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	VE\		, tude? months is	Degenci st	1:154400
Part)(၁), (or se	ction		
	501(c)(6).				V	- A1-
Ì	NA THE RESIDENCE OF THE PROPERTY OF THE PROPER				Yes	Ņο
1	Were substantially all (90% or more) dues received nondeductible by members?		•	1	\vdash	/
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	/	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3		✓
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," 0 answered "Yes."				line (3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of	1			
а	Current year	•	2a			
þ	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?	•	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Part	V Supplemental Information					
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information	up lis	t); Par	t II-A, I	ines 1	and
	,					
-						

Schedule C (Forn	n 990 or 990-EZ) 2018	Page 4
Part IV	Supplemental Information (continued)	
		<u> </u>
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to 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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Employer identification number

Open to Public Inspection

Flexible Intermediate Bulk Container Association, Inc.	75-2374070			
FORM 990, PART VI, SECTION A, LINE 6				
The Flexible Intermediate Bulk Container Association has two classes of membership as follows:				
Regular Members: Companies that manufacture, sell or recondition				
flexible intermediate bulk containers.				
Associate Members: Companies that provide a product or service relating to the manufacture, market	ing or use of			
flexible intermediate bulk containers.				
FORM 990, PART VI, SECTION A, LINE 7A				
The members of the Flexible Intermediate Bulk Container Association present at the annual and semi-	annual			
conferences elect the board of directors.				
FORM 990, PART VI, SECTION A, LINE 7B				
The board of directors recomends changes to the bylaws which much must be approved by the memb	ership present at the annual			
or semi-annual conferences.				
FORM 990, PART VI, SECTION B, LINE 11B				
The executive director carefully reviews the federal form 990 prior to filing and copies are electronical	y distributed			
	<u> </u>			
to the board of directors for review.				
FORM 990, PART VI, SECTION B, LINE15A				
The executive director's compensation is reviewed and approved by the board of directors during				
winter board of directors meeting each year.				

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization	Employer identification number
Flexible Intermediate Bulk Container Association, Inc.	75-2374070
	
FORM 990, PART VI, SECTION C, LINE 18	
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The Flexible Intermediate Bulk Container Association's tax documents are available to the public upon	
equest and they are also available on the GuideStar website (www2.guidestar.org)	
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FORM 990, PART VI, SECTION C, LINE 19	
ORW 330, FART VI, SECTION O, LINE 13	
The Flexible Intermediate Bulk Container Association's governing documents and	
inancial statements are available to the members on the FIBCA website and to the public upon request.	·
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