** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

		of the Treasury nue Service Go to www.irs.gov/Form990 for instructions and the la	•		Open to Public Inspection
			g JUN 30, 2021		
_	Check if	C Name of organization	D Employer ide	entifica ¹	tion number
	applicabl				
	Addre	e ECO-CYCLE, INC.			
	Name chang	Doing business as	84-0730	811	
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)			
	Final return termir		(303)444	-6634	
_	ated Amen	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$		9,361,729.
Ļ	return	BOOLDER, CO 00300-2000	H(a) Is this a gro	oup retu	
	tion pendi	F Name and address of principal officer: 302AMME TOMES	for subordi		····· — —
-		SAME AS C ABOVE	H(b) Are all subordi		
		empt status:			t. See instructions
		te: ▶ WWW.ECOCYCLE.ORG forganization: X Corporation Trust Association Other ▶ L	H(c) Group exer Year of formation: 1976		State of legal domicile: CO
	Part I	Summary	real of formation, 1976	IVI 3	State of legal domicile, CO
_	1	Briefly describe the organization's mission or most significant activities: INNOVATE, I	MPLEMENT AND		
9	ଛ '	ADVOCATE FOR LOCAL AND GLOBAL ZERO WASTE SOLUTIONS.	,		
2	2 3 4	Check this box if the organization discontinued its operations or disposed of	more than 25% of its n	et asset	S.
Ì	3			3	8
		Number of independent voting members of the governing body (Part VI, line 1b)		4	8
9	ช ผู 5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)		5	76
į		Total number of volunteers (estimate if necessary)		6	1050
-	7 a	- · · · · · · · · · · · · · · · · · · ·		7a	0.
_	<u> </u>	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
			Prior Year	$-\!\!\!\!+$	Current Year
9	8 6	Contributions and grants (Part VIII, line 1h)	699,1		1,360,181.
9	9 10 11	Program service revenue (Part VIII, line 2g)	7,548,4		7,971,481.
č	[10 [Investment income (Part VIII, column (A), lines 3, 4, and 7d)			30,067.
_	יין	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,241,8		
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	9,361,729.
	13 14	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			3,382,934.
8	n 15 9 16a	Professional fundraising fees (Part IX, column (A), line 11e)	-,,-	0.	0.
9	4\ I	Total fundraising expenses (Part IX, column (D), line 25)			
Ĺ	<u>x</u> ~ ~ ~	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,225,1	158.	5,368,495.
	- 1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,774,7	704.	8,751,429.
	19	Revenue less expenses. Subtract line 18 from line 12	-532,8	395.	610,300.
ō	Ces		Beginning of Current	/ear	End of Year
sets	20 21 22 22 22 22 22 22 22 22 22 22 22 22	Total assets (Part X, line 16)	9,379,0		9,419,278.
t As	띨 21	Total liabilities (Part X, line 26)	1,360,4	_	980,679.
		Net assets or fund balances. Subtract line 21 from line 20	8,018,6	62.	8,438,599.
	Part II	Signature Block			11 21 27 27
		ulties of perjury, I declare that I have examined this return, including accompanying schedules and st		-	nowledge and belief, it is
tru	ie, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which pre $I \ L$	parer has any knowledge.		
e:	an	Signature of officer	I Date		
	gn	SUZANNE JONES, EXECUTIVE DIRECTOR	2410		
. 16	ere	Type or print name and title			
_		Print/Type preparer's name Preparer's signature	Date Ch	eck	PTIN
Рa	id	SARAH HINTZ SARAH HINTZ	02/11/22 if sel	f-employed	P00492291
	eparer	Firm's name CLIFTONLARSONALLEN LLP	Firm's EI		41-0746749
	e Only	Firm's address 8390 EAST CRESCENT PARKWAY, SUITE 300			
		GREENWOOD VILLAGE, CO 80111	Phone no	(303)	779-5710

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$

■ Total program service expenses > 8,170,576.

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Form 990 (2020) ECO-CYCLE, INC. Part IV 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	٣		
U				x
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	Schedule D, Part III	8		X
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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
ч	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	٠٠		
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX		Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	21	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			١
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		Х
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		Х
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	L	х
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	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
=	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	,	19		x
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a		20a 20b		
b O4	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD		
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		X

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	· (continued)		Yes	Na.
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		res	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ı
	Schedule J	23		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
Z-Tu	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			ı
	Schedule K. If "No," go to line 25a	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·	any tax-exempt bonds?	24c		ı
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2-10		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			ı
		25b		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
_0	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			ı
		26		х
27	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			ı
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
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, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	ļ .		
O_	,	32		х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- OL		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	30		
٠.	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	554		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		ı
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		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	55		
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note: All Form 990 filers are required to complete Schedule O	38	х	ı
Pa		, 50		
	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		. 55	.,,
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	-		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
J	(gambling) winnings to prize winners?	10	х	

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Form 990 (2020) ECO-CYCLE, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	76			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
	-			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0 .		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccour	nt)?	4a		X
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 Ad	ccoun	ts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X
	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	e orga	anization solicit			v
	any contributions that were not tax deductible as charitable contributions?			6a		<u>x</u>
D	If "Yes," did the organization include with every solicitation an express statement that such contribution and the statement that such contribution are statement than such contribution are statement to the statement that such contribution are statement to the statement to the statement that such contribution are statement to the statement that such contribution are statement to the statement to the statement that such contribution are statement to the statement t	ons o	rgiπs	CL		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b		
7		vione r	provided to the payor?	7a		Х
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser If "Yes," did the organization notify the donor of the value of the goods or services provided?	VICES	novided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as rea	uired	75		
·	to file Form 8282?	25 TCQ	unca	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or			7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	е			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	ı	1			
	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	? 	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			120		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the					
IJ	organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
	Did the consideration which are a second of the first of the description of the descripti			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
-	excess parachute payment(s) during the year?			15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incor	ne?	16		Х
	If "Yes," complete Form 4720, Schedule O.					

Form 990 (2020) ECO-CYCLE, INC. 84-0730811 Page **6**

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	3		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent	3		
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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 on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
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	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
<u> </u>	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d tinan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	SUREE PONRATTANASIRI - (303) 444-6634 P.O. BOX 19006 BOULDER CO 80308-2006			

Form 990 (2020) ECO-CYCLE, INC. 84-0730811 Page **7**

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

• 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.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box	, unle	Pos heck ss per	rson i	than on the state of the state	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) SUZANNE JONES	40.00	1								
EXECUTIVE DIRECTOR				Х				109,496.	0.	12,600.
(2) KALIN STROVALL	40.00	1								
MAINTENANCE MANAGER						Х		101,469.	0.	13,542.
(3) MARTHA MATSCH	40.00	1								
DEPUTY DIRECTOR				Х				89,939.	0.	21,671.
(4) SUREE PONRATTANASIRI	40.00	1								
ACCOUNTING DIRECTOR				Х				86,798.	0.	11,418.
(5) JUDITH WONG	1.00	1								
BOARD PRESIDENT		Х		Х				0.	0.	0.
(6) IAN JACOBSON	1.00									
BOARD TREASURER		Х		Х				0.	0.	0.
(7) PAT SHANKS	1.00									
BOARD SECRETARY		Х		Х				0.	0.	0.
(8) STEVE BUSHONG	1.00									
DIRECTOR		Х						0.	0.	0.
(9) GARRETT CHAPPELL	1.00	1								
DIRECTOR		Х						0.	0.	0.
(10) CRYSTAL GRAY	1.00									
DIRECTOR		Х						0.	0.	0.
(11) CATHERINE GREENER	1.00									
DIRECTOR		Х						0.	0.	0.
(12) K.J. MCCORRY	1.00									
DIRECTOR		Х						0.	0.	0.
]								
]								
-		<u> </u>								
		1								
		<u> </u>								
		1								
-										Form 990 (2020)

Form	990 (2020) ECO-CYCLE, 1	INC.								84-073081	1	Pa	age 8
Par	t VII Section A. Officers, Directors, Tru	stees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
	(A)	(B)				C)			(D)	(E)		(F)	
	Name and title	Average	(do		Pos		l than d	one	Reportable	Reportable	Es	stimate	ed
		hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	an	nount	of
		week (list any					174140		from	from related	0000	other	tion
		hours for	direct				_		the organization	organizations (W-2/1099-MISC)		pensa	
		related	ee or	stee			nsate		(W-2/1099-MISC)	(** 27 1000 111100)		anizat	
		organizations	trust	nal tru		yee	om pe				•	d relat	
		below	Individual trustee or director	Institutional trustee	Jec	key employee	Highest compensated employee	ner			orga	anizati	ons
		line)	Indi	Insti	Officer	Key	High	Former					
1b	Subtotal							•	387,702.	0.		59,	231.
С	Total from continuation sheets to Part V	II, Section A						▶	0.	0.			0.
d	Total (add lines 1b and 1c)							<u> </u>	387,702.	0.		59,	231.
2	Total number of individuals (including but	not limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,0	000 of reportable			
	compensation from the organization										-		2
										ſ		Yes	No
3	Did the organization list any former office		-	•	•	•		•	•	·			
	line 1a? If "Yes," complete Schedule J for										3		X
4	For any individual listed on line 1a, is the s	-		-					•	-			v
_	and related organizations greater than \$15										4		Х
5	Did any person listed on line 1a receive or	•				•			•	ual for services	_		Х
Sec	rendered to the organization? If "Yes," coltion B. Independent Contractors	mplete Schedule	J fo	or su	ıch <u>ı</u>	oers	on .				5		Λ
1	Complete this table for your five highest of	omnensated inc	lene	nder	nt co	ntr	acto	rs th	nat received more than \$	100 000 of compensat	ion fro	nm	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
5280 STAFFING SOLUTIONS		
PO BOX 31001-2434, PASADENA, CA 91110	TEMPORARY LABOR	1,699,110.
WESTERN DISPOSAL SERVICES		
5880 BUTTE MILLE RD., BOULDER, CO 80301	DISPOSAL SERVICE	581,684.
BLUE STAR RECYCLERS		
PO BOX 64435, COLORADO SPRINGS, CO 80962	RECYCLING ELECTRONICS	266,285.
LEADPOINT BUSINESS SERVICE		
PO BOX 202056, DALLAS, TX 75320	TEMPORARY LABOR	132,798.
2 Total number of independent contractors (including but not limited to	o those listed above) who received more than	
0100 000 of a superior from the superior time.	À	

Form 990 (2020) ECO-CYCLE,

Part VIII Statement of Revenue

		Check if Schedule O	contain	is a response	or note to any line	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
							iunction revenue	business revenue	sections 512 - 514
Siα	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b			4.					
جَ ۾		Fundraising events							
fts, r A									
ig ig		Government grants (contr			1,024,939.				
Sin		All other contributions, gifts,			2,022,000				
e Ħ	'	similar amounts not included	-		335,242.				
흡환	_				308.				
o d	g				300.	1,360,181.			
Oa	<u>n</u>	Total. Add lines 1a-1f			Business Code	1,300,101.			
		DOLLI DED GOLINMY DEGY	at TN a	GEDVICEG	562000	4 074 050	4 074 050		
<u>:</u>	2 a	DEGUCE THE CERTIFICE	CLING	SERVICES		4,974,059.	4,974,059.		
e c	b			~	562000	2,037,983.	2,037,983.		
n S	С	HARD TO RECYCLE MAT		<u></u>	562000	740,174.	740,174.		
Program Service Revenue	d	RECYCLABLE MATERIAL	S		562000	214,902.	214,902.		
5	е	MISC PROG REVENUES			562000	4,363.	4,363.		
٩	f	All other program service	revenu	e					
	g	Total. Add lines 2a-2f			>	7,971,481.			
	3	Investment income (include	ling div	vidends, intere	st, and				
		other similar amounts)			🕨	20,846.			20,846.
	4	Income from investment of	of tax-e	xempt bond p	roceeds 🕨				
	5	Royalties	. <u></u>						
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	b	Less: rental expenses	6b						
	С	Rental income or (loss)	6с						
	d	Net rental income or (loss)							
	7 a	Gross amount from sales of		(i) Securities	(ii) Other				
		assets other than inventory	7a	8,021.	1,200.				
	b	Less: cost or other basis							
ē		and sales expenses	7b	0.	0.				
ther Revenue	С	Gain or (loss)	7c	8,021.	1,200.				
ş		Net gain or (loss)		•	•	9,221.			9,221.
ē		Gross income from fundraising				·			·
	-	including \$	•	·					
		contributions reported on							
		Part IV, line 18		·					
	b	Less: direct expenses			1				
		Net income or (loss) from							
		Gross income from gamin		-					
		Part IV, line 19							
	h	Less: direct expenses							
		Net income or (loss) from							
		Gross sales of inventory, I							
	.o u	and allowances							
	h	Less: cost of goods sold							
		Net income or (loss) from							
\dashv	<u> </u>	THE HIGHTIE OF (1055) HOTH	Jaics C	n inventory	Business Code				
SI	11 a								
e Te	ıı a b								
Miscellaneous Revenue	C								
Sce		All other revenue							
Ξ									
	<u>е</u> 12	Total. Add lines 11a-11d Total revenue. See instruction				9,361,729.	7,971,481.	0.	30,067.
	14	iolai ievellue. Ott IIISli delle	ກາວ			-,001,120.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	۱ ۰	, 55,007.

032009 12-23-20

Form 990 (2020) ECO-CYCLE, INC. Part IX Statement of Functional Expenses

ecii	on 501(c)(3) and 501(c)(4) organizations must comple			іріете соіитп (А).	X
	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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	Benefits paid to or for members				
5	Compensation of current officers, directors,	224 002	00 005	216 260	10.66
	trustees, and key employees	334,023.	98,985.	216,369.	18,669
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	Other salaries and wages	2,460,274.	2,346,986.	82,216.	31,07
8	Pension plan accruals and contributions (include				_
	section 401(k) and 403(b) employer contributions)	103,120.	97,635.	4,835.	65
9	Other employee benefits	282,649.	277,943.		4,70
0	Payroll taxes	202,868.	178,004.	21,382.	3,48
1	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	20,950.		20,950.	
d	Lobbying	23,665.	23,665.		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	452.		452.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	1,893,419.	1,884,687.	8,332.	40
2	Advertising and promotion	15,191.	13,554.	348.	1,28
3	Office expenses	213,176.	129,301.	79,786.	4,08
4	Information technology	69,082.	20,479.	48,603.	
5	Royalties				
6	Occupancy	307,229.	287,974.	18,795.	46
7	Travel	6,749.	3,773.	2,976.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	2,119.	603.	1,516.	
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	157,754.	156,498.	1,256.	
3	Insurance	142,944.	139,383.	3,561.	
4	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	EQUIPMENT & VEHICLE EXP	810,033.	805,374.	4,585.	7-
a b	HAULING	649,362.	649,362.	-,	,
C	WASTE DISPOSAL COSTS	635,976.	635,976.		
d	BOULDER COUNTY ED. FEE	212,067.	212,067.		
		208,327.	208,327.		
	All other expenses	8,751,429.	8,170,576.	515,962.	64,89
<u>5</u> 6		0,,01,427.	5,2,5,5,5	313,302.	04,00
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

rm 990 (2020) ECO-CYCLE, INC. 84-0730811 Page **11**

Form 990 (2020)
Part X Balance Sheet

Pa	rt X	Balance Sneet					
		Check if Schedule O contains a response or	note to any	y line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			25,209.	1	22,784.
	2	Savings and temporary cash investments			739,491.	2	271,035
	3	Pledges and grants receivable, net		6,285,827.	3	5,911,636	
	4				720,378.	4	1,176,628
	5	Accounts receivable, net Loans and other receivables from any curren			,	7	_,,
	"	trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disqu	•			3	
	"	under section 4958(f)(1)), and persons descri	•	,		6	
	7					7	
Assets	l .	Notes and loans receivable, net		8			
Ass	8	Inventories for sale or use			104,397.	9	93,954
•					101,057,	9	33,331
	IUa	Land, buildings, and equipment: cost or other	I I	3,951,802.			
		basis. Complete Part VI of Schedule D		3,468,153.	454,783.	40-	483,649
	b	1	1,017,154.		1,421,354		
	11	Investments - publicly traded securities		31,855.	11	38,238	
	12	Investments - other securities. See Part IV, lin		31,033.	12	30,230	
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	9,379,094.	15	9,419,278		
	16	Total assets. Add lines 1 through 15 (must e			677,227.	16	903,817
	17	Accounts payable and accrued expenses		077,227.	17	303,017	
	18	Grants payable	16,308.	18 19	46,734		
	19	Deferred revenue	10,300.	20	10,731		
	20 21	Tax-exempt bond liabilities					
	22	Escrow or custodial account liability. Comple				21	
Liabilities	22	Loans and other payables to any current or for					
ij		trustee, key employee, creator or founder, su controlled entity or family member of any of t				22	
Lia I	22						
	23 24	Secured mortgages and notes payable to un				23	
		Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li	nes 17-24)	. Complete Part X	666,897.	25	30.128.
	06	of Schedule D		·····	1,360,432.	26	980,679
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, 6			1,300,432.	26	300,013
S		and complete lines 27, 28, 32, and 33.	check here				
nç	27				1,732,835.	27	2,526,963
ala	27 28		6,285,827.	28	5,911,636		
<u>Б</u>	20	Net assets with donor restrictions Organizations that do not follow FASB ASe	0,200,027,	20	0,511,000		
ᆵ		and complete lines 29 through 33.	C 930, CHE	ick liefe			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fun	nde			29	
ets						30	
SS	30	Paid-in or capital surplus, or land, building, o					
et A	31	Retained earnings, endowment, accumulated			8,018,662.	31	8,438,599
ž	32	Total net assets or fund balances				32	
	33	Total liabilities and net assets/fund balances			9,379,094.	33	9,419,27

Form 990 (2020) ECO-CYCLE, INC. 84-0730811 Page **12**

Pai	rt 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	9	,361,	729.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8	,751,	429.
3	Revenue less expenses. Subtract line 2 from line 1	3		610,	300.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8	,018,	662.
5	Net unrealized gains (losses) on investments	5		183,	828.
6	Donated services and use of facilities	6	-	374,	191.
7	Investment expenses	7			
8	Prior period adjustments	8			
9					0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	8	,438,	599.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Х
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	-			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		
			Form	990	(2020)

SCHEDULE A

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number Name of the organization ECO-CYCLE INC 84-0730811 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	71		,			
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and	. ,	` '	. ,	()	, ,	
	membership fees received. (Do not						
	include any "unusual grants.")	193,863.	303,265.	624,442.	699,172.	1,360,181.	3,180,923.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	95,364.	31,788.	33,788.	389,454.	374,191.	924,585.
4	Total. Add lines 1 through 3	289,227.	335,053.	658,230.	1,088,626.	1,734,372.	4,105,508.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						4,105,508.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	289,227.	335,053.	658,230.	1,088,626.	1,734,372.	4,105,508.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	35,887.	31,079.	30,546.	24,544.	20,846.	142,902.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	9,599.	178.	4,980.	16,099.		30,856.
11	Total support. Add lines 7 through 10						4,279,266.
12	Gross receipts from related activities,	•	,			12	37,136,155.
13	First 5 years. If the Form 990 is for the	-	st, second, third, fo	ourth, or fifth tax ye	ear as a section 5	01(c)(3)	. \square
<u></u>	organization, check this box and stop						>
	ction C. Computation of Publi						05.04
	Public support percentage for 2020 (li					14	95.94 %
15						15	89.38 %
168	33 1/3% support test - 2020. If the c						
	stop here. The organization qualifies						
r	33 1/3% support test - 2019. If the c						
	and stop here. The organization quali						
1/a	10% -facts-and-circumstances test	-					
	and if the organization meets the facts		•	-	•	VI now the organiza	tion
_	meets the facts-and-circumstances te	-	-		-		
b	10% -facts-and-circumstances test	•				•	U% or
	more, and if the organization meets th				-		. —
40	organization meets the facts-and-circu				• •		P
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a,	100, 1/a, or 1/b,		nd see instructions	_

Schedule A (Form 990 or 990-EZ) 2020

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ļ					
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the	ļ					
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-	ļ					
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to	ļ					
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to	ļ					
	the organization without charge	ļ					
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support				•		
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,	ļ					
	and income from similar sources	ļ					
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on	ļ					
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax y	year as a section 5	01(c)(3) organization	on,
	check this box and stop here						>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2020 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2019					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20)20 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
19a	a 33 1/3% support tests - 2020. If the	organization did n	not check the box o	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization quali	fies as a publicly s	upported organiza	tion	>
k	33 1/3% support tests - 2019. If the	organization did n	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	ınd
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly suppo	rted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	

032023 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

Page 4

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
0.0		
3с		
- 55		
4a		
41-		
4b		
4c		
-10		
5a		
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5b		
5c		
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7		
8		
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9a		
- Ju		
9b		
9с		
_		
40-		
10a		
10b		

Pa	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
2	the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. Ition E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	1-		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		,	
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		N ₂
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations					
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.					
	All other Type III non-functionally integrated supporting organizations must of		•			
Sect	Section A - Adjusted Net Income (A) Prior Year (b) Current Year (optional)					
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
_5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
a	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
c	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors					
	(explain in detail in Part VI):					
_2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 0.035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount	_		Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
_2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
_4	Enter greater of line 2 or line 3.	4				
_5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functionally	integra	ted Type III supporting orga	nization (see		
	instructions).					

Schedule A (Form 990 or 990-EZ) 2020

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations (continued)	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1	
	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpos	s 3		
4	Amounts paid to acquire exempt-use assets	., .	4	
	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)	5	
	Other distributions (describe in Part VI). See instructions.	, criac actano n	6	
	Total annual distributions. Add lines 1 through 6.		7	
	Distributions to attentive supported organizations to which to	the organization is responsive		
	(provide details in Part VI). See instructions.	J	8	
9	Distributable amount for 2020 from Section C, line 6		9	
	Line 8 amount divided by line 9 amount		10	
		(i)	(ii)	(iii)
Section	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2020	Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2020			
a	From 2015			
b	From 2016			
c	From 2017			
d	From 2018			
e	From 2019			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i_	Carryover from 2015 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,		
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Employer identification number

EC	CO-CYCLE, INC.	84-0730811				
Organization type (check	one):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
• •	is covered by the General Rule or a Special Rule .	e. See instructions.				
General Rule						
	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, cor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it must answer "No" o	aution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), at it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to extify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

Name of organization

ECO-CYCLE, INC.

84-0730811

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Name, audress, and ZIF + 4	\$\$618,697.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 3	Name, address, and ZIP + 4	Total contributions \$\$ \$ 225,189.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	\$\$ 149,950.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110/	Hamo, audi 655, and £ii + +	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Name, aud 555, and Zif + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

ECO-CYCLE, INC.

84-0730811

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		 \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			

Name of or	ganization			Employer identification number
ECO-CYCL	E, INC.			84-0730811
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional	through (e) and the following line charitable, etc., contributions of \$1,000	entry. For or	1(c)(7), (8), or (10) that total more than \$1,000 for the year ganizations be year. (Enter this info. once.) \$ \bigselectric \\$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of	gift	
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of	gift	
_	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No.			1	
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of	gift	
-	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-				
	Transferee's name, address, ar	(e) Transfer of		elationship of transferor to transferee
	mansieree s name, auuress, ai	T T	ne	reaction of emission to emissionee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2020

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 orga	onization	ions. Complete Part III.		Emn	loyer identification number
Name or orga	ECO-CYCLE,	TNC		Emp	84-0730811
Part I-A		anization is exempt und	er section 501(c)	or is a section 527 or	
 Provide Political 	a description of the organiz	ation's direct and indirect politic ures gn activities	al campaign activities i	n Part IV. ► 9	0.
Part I-B	Complete if the org	anization is exempt und	er section 501(c)(3).	
2 Enter th	ne amount of any excise tax ne amount of any excise tax	incurred by the organization unc incurred by organization managen n 4955 tax, did it file Form 4720	der section 4955 ers under section 4955	▶ 5	0.
4a Was a c	correction made?				Yes No
	describe in Part IV.	onication is avament and	ov costion 504(s)	avaant aastian FO4/s	.)(0)
Part I-C	<u> </u>	anization is exempt und			
	, ,	I by the filing organization for se	·		
		ization's funds contributed to ot	-		8
•		. Add lines 1 and 2. Enter here a			
					\$
		1120-POL for this year?			
made pa contribu	ayments. For each organiza	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organiz a separate political orga	zation's funds. Also enter th anization, such as a separat	e amount of political
	(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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2020

LHA

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Schedule C (Form 990 or 990-EZ) 2020 ECO-CYCI			730811 Page 2
Part II-A Complete if the organization section 501(h)).	n is exempt under section 501(c)(3) and file	a romi 5766 (ele	ction under
	gs to an affiliated group (and list in Part IV each affiliated	aroup member's name	address FIN
expenses, and share of exces		group momber o name	, add 655, 2114,
. 👝 ' ′	sed box A and "limited control" provisions apply.		
Limits on Lobi	oying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence pub	lic opinion (grassroots lobbying)	17,902.	
b Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	5,763.	
c Total lobbying expenditures (add lines 1a and	d 1b)	23,665.	
1.00		8,662,873.	
e Total exempt purpose expenditures (add line		8,686,538.	
f _Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.	584,327.	
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.		
g Grassroots nontaxable amount (enter 25% of	line 1f)	146,082.	
h Subtract line 1g from line 1a. If zero or less, e	enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	
j If there is an amount other than zero on eithe	er 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) a section 501(h) election do not have to complete all o e the separate instructions for lines 2a through 2f.)	f the five columns be	low.

Lobbying Expenditures During 4-Year Averaging Period						
Lobbying Experiorures During 4-1ear Averaging Perior						
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total	
2a Lobbying nontaxable amount	516,263.	573,405.	584,789.	584,327.	2,258,784.	
b Lobbying ceiling amount (150% of line 2a, column(e))					3,388,176.	
c Total lobbying expenditures	6,060.	5,101.	21,262.	23,665.	56,088.	
d Grassroots nontaxable amount	129,066.	143,351.	146,197.	146,082.	564,696.	
e Grassroots ceiling amount (150% of line 2d, column (e))					847,044.	
f Grassroots lobbying expenditures	4,764.	2,925.	15,308.	17,902.	40,899.	

Schedule C (Form 990 or 990-EZ) 2020

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

r each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a))	(k	b)
the lobbying activity.	Yes	No	Amo	ount
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:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5). or sec	ction	
501(c)(6).	00 1(0)(0	,,, 0. 00		
			Yes	N
		4		
Were substantially all (90% or more) dues received nondeductible by members?		<u>1</u>		
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lart 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	ne prior year?	2 5), or sec		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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 answered "Yes."	ne prior year? on 501(c)(5 "No" OR (2 3 5), or sec (b) Part		3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?	ne prior year? on 501(c)(5 "No" OR (2 3 5), or sec (b) Part 2 2 2 2 3 4 5	III-A, line	3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perspenditure next year? Taxable amount of lobbying and political expenditures (See instructions) Supplemental Information Divide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ne prior year? on 501(c)(5 "No" OR (2 3 5), or sec (b) Part 1 2a 2b 2c 3	III-A, line	3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart 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 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perspenditure next year? Taxable amount of lobbying and political expenditures (See instructions) Supplemental Information Divide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	ne prior year? on 501(c)(5 "No" OR (2 3 5), or sec (b) Part 1 2a 2b 2c 3	III-A, line	3, is

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ECO-CYCLE, INC.

Employer identification number 84 - 0730811

Pai	rt I Organizations Maintaining Donor Advised	d Funds or Other Similar Fun	ds or Ad	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line			
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor ac	lvised fun	ds
	are the organization's property, subject to the organization's e			
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can	be used c	nly
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpo	se confer	ing
D :				
Pai	301112131311111111111111111111111111111		0, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreat	· —		orically important land area
	Protection of natural habitat	Preservation	n of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the fo	rm of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic stru			2c
d	()			
	listed in the National Register			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by	the organ	ization during the tax
	year ▶			
4	Number of states where property subject to conservation eas		_	
5	Does the organization have a written policy regarding the peri			
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing c	onservatio	on easements during the year
_				
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conse	rvation ea	sements during the year
•	Does each conservation easement reported on line 2(d) above		70/L\/4\/D\	(2)
8				
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation			
9	balance sheet, and include, if applicable, the text of the footn			
	organization's accounting for conservation easements.	iote to the organization's illiancial state	ements tri	at describes trie
Pai	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 958	8. not to report in its revenue stateme	nt and bal	ance sheet works
	of art, historical treasures, or other similar assets held for pub	•		
	service, provide in Part XIII the text of the footnote to its finan	, ,		•
b	If the organization elected, as permitted under FASB ASC 958			e sheet works of
	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items:	•		•
	(i) Revenue included on Form 990, Part VIII, line 1			> \$
				L A
2	If the organization received or held works of art, historical trea			
	the following amounts required to be reported under FASB AS		- ′	
а		· ·		> \$
LHA	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2020

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10,

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a Land					
b Buildings					
c Leasehold improvements		172,451.	134,148.	38,303.	
d Equipment		1,582,234.	1,405,196.	177,038.	
e Other		2,197,117.	1,928,809.	268,308.	
otal. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)					

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020 ECO-CYCLE, INC.		84	1-0730811 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	i-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E) (F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
	E 000 B 1 B 1 B	44 0 5 000 5 1 1 1	
Complete if the organization answered "Yes"	Description	11d. See Form 990, Part X, line 15.	(b) Book value
	Description		(b) book value
<u>(1)</u>			
(2) (3)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	15)	•	
Part X Other Liabilities.	, 10.,		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability	, ,	,	(b) Book value
(1) Federal income taxes			_
(2) DEPOSITS PAYABLE			30,128

<u>1. </u>	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEPOSITS PAYABLE	30,128.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	30,128.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the Х organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2020

Par	Keconciliation of Revenue per Audited Financial S		e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b			
5 Do:	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line † XII Reconciliation of Expenses per Audited Financial	12.)	5	
Pai		-	ses per neturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV		T.1	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities			
b	Prior year adjustments			
C	Other losses			
d	Other (Describe in Part XIII.)		25	
_	Add lines 2a through 2d			
3 4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:		3	
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. lin			
	t XIII Supplemental Information.	<u>e 10.)</u> ·····		
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a al	nd 4: Part IV. lines 1b and 2b: F	art V. line 4: Part X. line 2: Part X	ΧI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide		, , , , , , , , , , , , , , , , , , , ,	,
		•		
PART	X, LINE 2:			
ECO-	CYCLE IS A NONPROFIT ORGANIZATION EXEMPT FROM FEDERAL	INCOME AND		
COLO	RADO INCOME TAXES UNDER THE PROVISIONS OF INTERNAL REV	ENUE CODE		
anam	TON FOLICA (A) (A) WONEYED TOO GUAL DEPARTMENT OF THE	NGOVE ENVES ON		
SECT	ION 501(C)(3). HOWEVER, ECO CYCLE REMAINS SUBJECT TO I	NCOME TAXES ON		
λNV	NEW THOOME WHAT TO DEDITIED EDOM A WDADE OD DIICTNEGO D	ECIII ADI V CADDIED		
ANI	NET INCOME THAT IS DERIVED FROM A TRADE OR BUSINESS, R	EGULARLI CARRIED		
ON A	ND NOT IN FURTHERANCE OF THE PURPOSE FOR WHICH IT WAS	CRANTED TAY		
ON A	NO NOT IN FORTILEMANCE OF THE FORTOBE FOR WHICH IT WAS	GRANIED IAX		
EXEM	PTION. NO INCOME TAX PROVISION HAS BEEN RECORDED AS TH	E NET INCOME IF		
ANY.	FROM ANY UNRELATED TRADE OR BUSINESS, IN THE OPINION	OF MANAGEMENT		
	,	· · · · · · · · · · · · · · · · · · ·		
IS N	OT MATERIAL TO THE FINANCIAL STATEMENTS TAKEN AS A WHO	LE.		
MANA	GEMENT BELIEVES THAT NO UNCERTAIN TAX POSITIONS EXIST	FOR ECO-CYCLE AT		
JUNE	30, 2021 AND 2020. ECO-CYCLE IS REQUIRED TO FILE A RE	TURN OF		

Schedule D (Form 990) 2020 ECO-CYCLE, INC.	84-0730811	Page 5
Schedule D (Form 990) 2020 ECO-CYCLE, INC. Part XIII Supplemental Information (continued)		
ORGANIZATION EXEMPT FROM INCOME TAX (FORM 990) WITH THE INTERNAL REVENUE		
ORGANIZATION EXEMPT FROM INCOME TAX (FORM 550) WITH THE INTERNAL REVENUE		
SERVICE (IRS) ON AN ANNUAL BASIS.		

13160211 131839 011-052223

SCHEDULE 0

(Form 990 or 990-EZ)

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.

OMB No. 1545-0047

2020
Open to Public

Department of the Treasury Internal Revenue Service

Market of Form 990 or 990-EZ.

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

Employer identification number 84-0730811

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

POLLUTION REDUCTION ACT.

OUR SCHOOLS PROGRAM IMPLEMENTED COVID ADAPTATIONS TO CONTINUE PROVIDING

EXCEPTIONAL SCHOOL PROGRAMMING AND MAINTAIN CONTRACTS BY MARKETING

VIRTUAL ON-LINE TEACHING AND CREATING MORE DIGITAL LESSON PACKAGES.

AT THE CENTER FOR HARD TO RECYCLE MATERIALS FACILITY AND THE BOULDER

COUNTY RECYCLING CENTER WE WERE ABLE TO MAINTAIN OPERATIONS BY ADAPTING

AND ADOPTING COVID PRECAUTIONS AND PROTOCOLS.

ECO-CYCLE TEMPORARILY CLOSED DOWN THE ZERO WASTE EVENTS PROGRAM DUE TO

THE LACK OF LARGE PUBLIC EVENTS AS A RESULT OF THE COVID PANDEMIC.

ECO-CYCLE IS REVISING THE ZERO WASTE EVENTS PROGRAM TO NO LONGER

PROVIDE STAFFED EVENT SERVICES BUT WILL CONTINUE TO PROVIDE

DO-IT-YOURSELF EVENT EQUIPMENT RENTAL, HAULING OF EVENT RECYCLING AND

COMPOSTABLE MATERIALS, AND CONSULTING ON HOW TO ORGANIZE ZERO WASTE

EVENTS.

ECO-CYCLE HELPED CRAFT AND PASS THE HB21-1162, THE PLASTIC POLLUTION

PROTECTION ACT, TO REDUCE USE OF SINGLE-USE DISPOSABLE PLASTIC BAGS AND

POLYSTYRENE TAKE-OUT FOOD AND DRINK CONTAINERS IN CO. WE MORE DEEPLY

INCORPORATED EQUITY INTO OUR WORK BY RAISING WAGES FOR THE LEAST PAID

EMPLOYEES IN THE ORGANIZATION AND BY REVAMPING OUR SOCIAL EQUITY POLICY

STATEMENT TO BETTER ARTICULATE THE DISCONNECT BETWEEN COMMUNITIES

IMPACTED BY PRODUCTION POLLUTION AND THOSE WITH HIGHER CONSUMPTION

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization ECO-CYCLE, INC.	Employer identification number 84-0730811
LEVELS.	
ECO-CYCLE ENGAGED MORE DEEPLY IN ZERO WASTE POLICY DISCUSSIONS AT THE	
NATIONAL LEVEL AS CO-FOUNDERS OF THE NEWLY LAUNCHED ALLIANCE OF MISSION	
BASED RECYCLERS (AMBR), INCLUDING NOTABLY AS NEW MEMBERS OF THE U.S.	
PLASTICS PACT.	
ECO-CYCLE HIRED A NEW JOINT BUSINESS/CHARM DIRECTOR (JUSTIN STOCKDALE)	
TO MERGE THE TWO DEPARTMENTS INTO A MORE SYNERGISTIC TEAM AND APPLY AN	
ENTREPRENEURIAL LENS AND UPDATE OUR BUSINESS PLANS.	
WE TRANSFORMED DAN MATSCH'S ROLE TO BECOME A FULL-TIME DIRECTOR OF OUR	
EVOLVING COMPOST & CARBON FARMING DEPARTMENT TO MAKE THE MOST OF THIS	
EMERGING ZERO WASTE FRONTIER.	
WE HIRED A NEW DIRECTOR OF THE SCHOOLS DEPARTMENT (KIM ORR) AS CYNDRA'S	
SUCCESSOR AFTER 30 YEARS AT ECO-CYCLE.	
ECO-CYCLE TRANSITIONED TO CIGNA AS OUR HEALTH CARE PROVIDER TO PROVIDE	
STAFF WITH A ROBUST AND COST-EFFECTIVE BENEFITS PACKAGE.	
FORM 990, PART VI, SECTION A, LINE 1:	
THE EXECUTIVE COMMITTEE SHALL BE A STANDING COMMITTEE EMPOWERED TO ACT ON	
BEHALF OF THE BOARD BETWEEN MEETINGS, IN EMERGENCY SITUATIONS AND AS	
NEEDED. ALL ACTIONS OF THE EXECUTIVE COMMITTEE SHALL BE CONFIRMED BY THE	
FULL BOARD AT THE NEXT REGULARLY SCHEDULED MEETING FOLLOWING EXECUTIVE	
COMMITTEE ACTION.	

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization ECO-CYCLE, INC.	Employer identification number 84-0730811
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS PREPARED BY THE ORGANIZATION'S PUBLIC ACCOUNTING FIRM BASED	
ON INFORMATION PROVIDED BY THE MANAGEMENT. ONCE A DRAFT OF THE FILING IS	
AVAILABLE, THE FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE WHO APPROVES	
THE FORM 990 BEFORE FILING. A COPY IS MADE AVAILABLE TO THE BOARD PRIOR TO	
FILING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ON AN ANNUAL BASIS, OR AS NEEDED, THE BOARD IS ASKED TO REVIEW AND DISCLOSE	
ANY POTENTIAL CONFLICTS OF INTEREST THEY MAY HAVE. THE ORGANIZATION HAS A	
FORM THAT DETAILS AREAS OF POTENTIAL CONFLICT THAT THEY CONSIDER AND FILL	
IN AND THEN THE BOARD REVIEWS WHETHER ANYTHING LISTED (IF ANYTHING), IS A	
CONFLICT OF INTEREST. ADDITIONALLY, THE BOARD PRESIDENT AND EXECUTIVE	
DIRECTOR ACTIVELY MONITOR ANY CONCERNS. IF A CONCERN WERE TO BE RAISED, THE	
ORGANIZATION DOES HAVE A MECHANISM BY WHICH THE ENTIRE BOARD CAN REVIEW,	
DISCUSS AND COME TO A DETERMINATION ON THE CONCERN. THESE DELIBERATIONS ARE	
RECORDED IN THE MEETING MINUTES. THE CONFLICTED PERSON WILL NOT BE	
PERMITTED TO PARTICIPATE IN THE TRANSACTION OR DECISION IF IT IS DETERMINED	
A CONFLICT OF INTEREST EXISTS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED ANNUALLY BY THE FULL	
BOARD OF DIRECTORS AS PART OF THE EVALUATION PROCESS. FIRST BOARD MEMBERS	
INDIVIDUALLY COMPLETE THE EVALUATION FORM WITH NUMERIC RATINGS AND A	
NARRATIVE JUSTIFICATION. THE PRESIDENT OF THE BOARD CONSOLIDATES THE	
RATINGS, RECOMMENDS AN OVERALL RATING AND PROPOSES COMPENSATION. THE	
PROPOSED COMPENSATION IS BASED ON THE RATING AND IS COMPARED TO SIMILAR	
POSITIONS ON THE ANNUAL COLORADO NONPROFIT SALARY AND BENEFITS SURVEY.	

Name of the organization ECO-CYCLE, INC.	Employer identification number 84-0730811
FINAL SALARY IS APPROVED OR MODIFIED BY VOTE OF THE BOARD.	
MANAGERS ARE REVIEWED BY THE EXECUTIVE DIRECTOR.	
PAY WAS LAST REVIEWED IN 2021 FOR THE EXECUTIVE DIRECTOR AND MANAGERS	
FORM 990, PART VI, SECTION C, LINE 19:	
ECO-CYCLE MAKES ITS GOVERNING DOCUMENTS AVAILABLE UPON REQUEST. THE	
ORGANIZATION DOES NOT MAKE ITS FINANCIAL STATEMENTS OR CONFLICT OF IN	TEREST
POLICY AVAILABLE TO THE PUBLIC.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONTRACT SERVICES:	
PROGRAM SERVICE EXPENSES 1,883	1,144.
MANAGEMENT AND GENERAL EXPENSES	350.
FUNDRAISING EXPENSES	400.
TOTAL EXPENSES 1,888	1,894.
PAYROLL SERVICES:	
PROGRAM SERVICE EXPENSES	3,543.
MANAGEMENT AND GENERAL EXPENSES	7,982.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES 1:	1,525.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 1,899	3,419.
PART XII, LINE 2C	
THE PROCESS FOR SELECTING AN INDEPENDENT ACCOUNTANT DID NOT CHANGE IN	
THE TAX YEAR.	0.1.1.0/5.000.000.57\0000

Name of the organization ECO-CYCLE, INC.	Employer identification number 84-0730811

CARRYOVER DATA TO 2021

Name ECO-CYCLE, INC.	Employer Identification Num 84-0730811	ber
Based on the information provided with this return, the following are possible carryover amounts to nex	•	
FEDERAL AMT NET OPERATING LOSS	,	3/1 151
FEDERAL ART NET OPERATING LOSS		34,151.

019341 04-01-20