

Short Form Return of Organization Exempt From Income Tax

2014

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.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning _____, 2014, and ending _____, 20

| | | |
|--|--|--|
| <p>B Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | <p>C Name of organization International Assn. of Geosynthetic Installers</p> <p>Number and street (or P.O. box, if mail is not delivered to street address) Room/suite 8357 N Rampart Range Rd 106 PMB 154</p> <p>City or town, state or province, country, and ZIP or foreign postal code Roxborough CO 80125-9365</p> | <p>D Employer identification number 41-1827177</p> <p>E Telephone number 720-353-4977</p> <p>F Group Exemption Number ▶</p> |
|--|--|--|

G Accounting Method: Cash Accrual Other (specify) ▶ _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ _____

J Tax-exempt status (check only one) - 501(c)(3) 501(c)(6) ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 122,242.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I

| | | | | |
|-------------------|---|--|----------|---------|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received | 1 | |
| | 2 | Program service revenue including government fees and contracts | 2 | 64,757. |
| | 3 | Membership dues and assessments | 3 | 57,485. |
| | 4 | Investment income | 4 | |
| | 5 a | Gross amount from sale of assets other than inventory | 5 a | |
| | 5 b | Less: cost or other basis and sales expenses | 5 b | |
| | 5 c | Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) | 5 c | |
| | 6 | Gaming and fundraising events | | |
| | 6 a | Gross income from gaming (attach Schedule G if greater than \$15,000) | 6 a | |
| 6 b | Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceed \$15,000) | 6 b | | |
| 6 c | Less: direct expenses from gaming and fundraising events | 6 c | | |
| 6 d | Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) | 6 d | | |
| 7 a | Gross sales of inventory, less returns and allowances | 7 a | | |
| 7 b | Less: cost of goods sold | 7 b | | |
| 7 c | Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) | 7 c | | |
| 8 | Other revenue (describe in Schedule O) | 8 | | |
| 9 | Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶ | 9 | 122,242. | |
| Expenses | 10 | Grants and similar amounts paid (list in Schedule O) | 10 | |
| | 11 | Benefits paid to or for members | 11 | |
| | 12 | Salaries, other compensation, and employee benefits | 12 | |
| | 13 | Professional fees and other payments to independent contractors | 13 | 54,967. |
| | 14 | Occupancy, rent, utilities, and maintenance | 14 | |
| | 15 | Printing, publications, postage, and shipping | 15 | 10,929. |
| | 16 | Other expenses (describe in Schedule O) | 16 | 57,331. |
| 17 | Total expenses. Add lines 10 through 16 ▶ | 17 | 123,227. | |
| Net Assets | 18 | Excess or (deficit) for the year (Subtract line 17 from line 9) | 18 | (985.) |
| | 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | 19 | 65,105. |
| | 20 | Other changes in net assets or fund balances (explain in Schedule O) | 20 | |
| | 21 | Net assets or fund balances at end of year. Combine lines 18 through 20 ▶ | 21 | 64,120. |

For Paperwork Reduction Act Notice, see the separate instructions.

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II [X]

Table with columns (A) Beginning of year and (B) End of year. Rows include: 22 Cash, savings, and investments; 23 Land and buildings; 24 Other assets; 25 Total assets; 26 Total liabilities; 27 Net assets or fund balances.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III. []

What is the organization's primary exempt purpose? Advance Geosynthetic Technology
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

Table with columns for program service descriptions (28-31) and corresponding expense amounts (28a-31a). Row 28: To advance geosynthetic installation and construction technologies.

Part IV List of Officers, Directors, Trustees, and Key Employees. (list each one even if not compensated - see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV. []

Table with 5 columns: (a) Name and title, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans & deferred comp., (e) Estimated amount of other compensation. Row 1: Attached, 0.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

Form 990-EZ questions 33-45b with Yes/No columns and handwritten entries for 37a, 38a, 39a, 39b, 40a, 40b, 40c, 40e, 41, 42a, 42b, 42c, 43, 44a, 44b, 44c, 44d, 45a, 45b.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Table with columns Yes, No and row 46 with an X in the No column.

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

Table with columns Yes, No and row 47.

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

Table with columns Yes, No and row 48.

49a Did the organization make any transfers to an exempt non-charitable related organization?

Table with columns Yes, No and row 49a.

b If "Yes," was the related organization a section 527 organization?

Table with columns Yes, No and row 49b.

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation, (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation. Row 1 contains 'NONE'.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation. Row 1 contains 'NONE'.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note. All section 501(c)(3) organizations must attach a completed Schedule A

Yes No (X)

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer Laurie Honnigford, Date May 11, 2015, Title Managing Director

Paid Preparer Use Only: Print/Type preparer's name Thomas G Sims, Preparer's signature Tom G Sims, CPA, Date 5-8-15, Check self-employed, PTIN P01239846, Firm's name Sims Co CPAs, Firm's EIN 75-2994546, Firm's address 5100 Thimsen Ave Suite 140, MINNETONKA MN 55345, Phone no. 952-474-8630

May the IRS discuss this return with the preparer shown above? See instructions Yes No (X)

International Association of Geosynthetics Installers Board of Directors 2014

President

Todd Harman
Hallaton, Inc.
1206 Sparks Road
Sparks, MD 21152
Phone: (410) 583-7700
Mobile: (251) 751-0880
Fax: (410) 583-7720
tharman@hallaton.com
Elected: January 2006

2nd Vice President

Nicky Araujo
CEO President
Servicios de Ingenieria Geosintetica, S.A.
Del Triangulo de Rohrmoser, 400 n 25 e
Payas, San Jose Costa Rica
Phone: (506) 231-4238
Mobile: (786) 239-0827
Fax: (506) 290-2118
Email: geosigsa@ice.co.cr
Elected: January 2008

Director

Bill Shehane
Seaman Corp
442 South Main Street
Suite 2
Davidson, NC 28036
Phone: 1 (704) 987-0055
Mobile:
Fax: 1 (704) 987-0140
Email: bshehane@seamancorp.com
Elected: January 2008

Director

John McElhatton
Nilex Civil Environmental Group
9304 – 39 Avenue NW
Edmonton, AB Canada
T6E 6L8
Phone: (780) 463-9535
Mobile:
Fax: (780) 463-1773
jmcelhatton@nilex.com
Elected: January 2013

Managing Director

Laurie Honnigford
The Honnigford Group, LLC
PO Box 18012
St. Paul, MN 55118-0012
Phone: (651) 554-1895
Cellular: (651) 398-6975
Fax: (612) 235-6484
laji@iagi.org
Ex officio

1st Vice President

Max Brady
DDT Liners
20 Carroll Street
P.O. Box 6493
Toowoomba, Queensland 4350 Australia
Phone: 61-7-4633-7134
Mobile:
Fax: 61-7-4633-0233
EMAIL: max@ddtliners.com.au
Nominated: July 2011

Treasurer

Chris Eichelberger
American Environmental Group LTD
3600 Brecksville Road, Suite 100
Richfield, OH 44286
Phone: (330) 659-5930
Mobile: (330) 352-0363
Fax: (330) 659-5931
Email: ceichelberger@aeql.net
Elected: January 2011

Director

"Demo" Dave McLaury
DEMTECH Services, Inc.
P.O. Box 2165
Placerville, CA 95667
Phone: (530) 621-3200 or (888) 324-9353
Mobile: (530) 409-1603
Fax: (530) 621-0150
Demodave@demtech.com
Elected: January 2004

Director

John Heap
Colorado Lining International
1062 Singing Hills Road
Parker, CO 80138-4653
Phone: (303) 951-5911
Mobile: (303) 885-0262
Fax: (303) 841-5780
jheap@coloradolining.com
Elected: January 2006

Immediate Past President / Director

Brian McKeown
Clean Air & Water Systems
123 Elm Street
PO Box 337
Dousman, WI 53118
Phone: (262) 965-4366
Cellular: (262) 269-6073
Fax: (262) 965-4369
bmckeown@caawssystems.com
Elected: January 2004