

Return of Organization Exempt From Income Tax

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

2006

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2006 calendar year, or tax year beginning and ending

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: INTERNATIONAL ASSOCIATION FOR MATHEMATICAL GEOLOGY C/O GINA ROSS. D Employer identification number: 23-7337381. E Telephone number: (785) 842-6092. F Accounting method: [X] Cash [] Accrual [] Other (specify).

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). H and I are not applicable to section 527 organizations.

G Website: WWW.IAMG.ORG

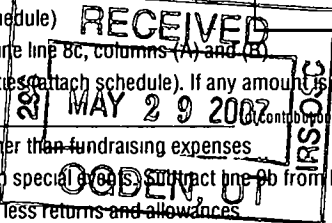
J Organization type (check only one) [X] 501(c)(3) (insert no) [] 4947(a)(1) or [] 527

K Check here [] if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 151,791.

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

Table with columns for Revenue, Expenses, and Net Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6 Gross rents; 7 Other investment income; 8 Gross amount from sales of assets other than inventory; 9 Special events and activities; 10 Gross sales of inventory, less returns and allowances; 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.



SCANNED JUL 17 2007

**INTERNATIONAL ASSOCIATION FOR
MATHEMATICAL GEOLOGY C/O GINA ROSS**

Form 990 (2006)

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>19,600</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>	19,600.	19,600.	STATEMENT 2	STATEMENT 3
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	0.	0.	0.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c				
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27				
29 Payroll taxes				
30 Professional fundraising fees				
31 Accounting fees	5,555.		5,555.	
32 Legal fees				
33 Supplies				
34 Telephone				
35 Postage and shipping				
36 Occupancy				
37 Equipment rental and maintenance				
38 Printing and publications	24,185.	24,185.		
39 Travel				
40 Conferences, conventions, and meetings	50,914.	50,914.		
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)				
43 Other expenses not covered above (itemize)				
a CONTRACT LABOR	3,078.		3,078.	
b COMPUTER EXPENSES	3,714.	3,714.		
c MISCELLANEOUS	1,348.	1,348.		
d				
e				
f				
g				
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	108,394.	99,761.	8,633.	0.

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

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Form 990 (2006)

**INTERNATIONAL ASSOCIATION FOR
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Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 4</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a THE ASSOCIATION PROVIDES AWARDS TO RECOGNIZE SENIOR SCIENTISTS FOR CAREER ACHIEVEMENTS AND MID-CAREER SCIENTISTS FOR EXCEPTIONAL POTENTIAL AND PROVEN RESEARCH ABILITY, AND TO RECOGNIZE STUDENT RESEARCH.	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	19,600.
b THE ASSOCIATION PUBLISHES JOURNALS THAT CONSIST OF ARTICLES AND INFORMATION PROMOTING INTERNATIONAL COOPERATION IN THE APPLICATION AND USE OF MATHEMATICS IN GEOLOGICAL RESEARCH AND TECHNOLOGY.	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	24,185.
c THE ASSOCIATION PUBLISHES NEWSLETTERS TO PROMOTE INTERNATIONAL COOPERATION IN THE APPLICATION AND USE OF MATHEMATICS IN GEOLOGICAL RESEARCH AND TECHNOLOGY.	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d THE ASSOCIATION SPONSORS VARIOUS MEETINGS TO PROMOTE THE APPLICATION AND USE OF MATHEMATICS IN GEOLOGICAL RESEARCH AND TECHNOLOGY.	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	55,976.
e Other program services (attach schedule)	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	99,761.

Form **990** (2006)

**INTERNATIONAL ASSOCIATION FOR
MATHEMATICAL GEOLOGY C/O GINA ROSS**

Form 990 (2006)

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Part IV Balance Sheets (See the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year	
Assets	45 Cash - non-interest-bearing	55,351.	45	58,762.	
	46 Savings and temporary cash investments		46		
	47 a Accounts receivable	47a			
	b Less: allowance for doubtful accounts	47b	47c		
	48 a Pledges receivable	48a			
	b Less: allowance for doubtful accounts	48b	48c		
	49 Grants receivable		49		
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a		
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b		
	51 a Other notes and loans receivable	51a			
	b Less: allowance for doubtful accounts	51b	51c		
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges		53		
	54 a Investments - publicly-traded securities STMT 5 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		724,371.	54a	810,884.
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54b	
	55 a Investments - land, buildings, and equipment, basis	55a			
	b Less: accumulated depreciation	55b		55c	
	56 Investments - other			56	
57 a Land, buildings, and equipment basis	57a				
b Less: accumulated depreciation	57b		57c		
58 Other assets, including program-related investments (describe <input type="checkbox"/>)			58		
59 Total assets (must equal line 74). Add lines 45 through 58		779,722.	59	869,646.	
Liabilities	60 Accounts payable and accrued expenses		60		
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities		64a		
	b Mortgages and other notes payable		64b		
	65 Other liabilities (describe <input type="checkbox"/>)		65		
66 Total liabilities. Add lines 60 through 65		0.	66	0.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	779,722.	67	869,646.	
	68 Temporarily restricted		68		
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		779,722.	73	869,646.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		779,722.	74	869,646.	

Form 990 (2006)

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions)*

a	Total revenue, gains, and other support per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 12			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify): _____	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify): _____	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12) Add lines c and d		e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 17			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify): _____	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify): _____	d2		
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17) Add lines c and d		e	

Part V-A Current Officers, Directors, Trustees, and Key Employees *(List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)*

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE ATTACHED LIST				
	0.00	0.	0.	0.

INTERNATIONAL ASSOCIATION FOR
MATHEMATICAL GEOLOGY C/O GINA ROSS

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Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) **Yes No**

75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 0

b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) **75b** **X**

c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization"
If "Yes," attach a statement that includes the information described in the instructions **75c** **X**

d Does the organization have a written conflict of interest policy? **75d** **X**

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NONE				

Part VI Other Information (See the instructions.) **Yes No**

76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change **76** **X**

77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. **77** **X**

78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? **78a** **X**
 b If "Yes," has it filed a tax return on Form 990-T for this year? N/A **78b**

79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement **79** **X**

80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? **80a** **X**
 b If "Yes," enter the name of the organization N/A
 _____ and check whether it is exempt or nonexempt

81 a Enter direct or indirect political expenditures. (See line 81 instructions) **81a** 0.

b Did the organization file Form 1120-POL for this year? **81b** **X**

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Part VI Other Information (continued)		Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b		N/A
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b		N/A
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		N/A
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b		N/A
c Dues, assessments, and similar amounts from members	85c		N/A
d Section 162(e) lobbying and political expenditures	85d		N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		N/A
86 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 12	86a		N/A
b Gross receipts, included on line 12, for public use of club facilities	86b		N/A
87 501(c)(12) organizations. Enter a Gross income from members or shareholders	87a		N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b		N/A
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		X
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		X
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>			
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>			
d Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>			
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		X
f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
g For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		X
90 a List the states with which a copy of this return is filed NONE			
b Number of employees employed in the pay period that includes March 12, 2006	90b		0
91 a The books are in care of GINA ROSS Telephone no. (785) 842-6092 Located at PO BOX 442504, LAWRENCE, KS ZIP + 4 66044			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b		X

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Part VI Other Information (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c Yes No
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a EDUCATIONAL PUBLICATION					
b ROYALTIES					83,073.
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					20,783.
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	45,985.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS					1,950.
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		45,985.	105,806.
105 Total (add line 104, columns (B), (D), and (E))					151,791.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	EDUCATIONAL PUBLICATIONS RELATING TO MATHEMATICAL GEOLOGY
94	MEMBERSHIP DUES PAID BY MEMBERS TO BELONG TO THE ASSOCIATION.
103A	MISCELLANEOUS INCOME RELATING TO MATHEMATICAL GEOLOGY

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Natu	(D)	(E)
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated

(a) Did the organization, during the year, receive any funds, directly or indirectly,
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on
 Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13) **N/A**

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	----- -----					
b	----- -----					
c	----- -----					
Totals						

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	----- -----					
b	----- -----					
c	----- -----					
Totals						

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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.

Please Sign Here
 Signature of officer: *Gina Ross* Date: **5-23-07**
 Type or print name and title: **GINA ROSS, TREASURER**

Paid Preparer's Use Only
 Preparer's signature: *[Signature]* Date: **05/22/07** Check if self-employed:
 Firm's name (or yours if self-employed), address, and ZIP + 4: **LOWENTHAL, SINGLETON, WEBB & WILSON, PA**
900 MASSACHUSETTS, SUITE 301
LAWRENCE, KS 66044-2868 EIN: **[]** Preparer's SSN or PTIN (See Gen Inst X)
 Phone no.: **(785) 749-5050**

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2006

Name of the organization **INTERNATIONAL ASSOCIATION FOR MATHEMATICAL GEOLOGY C/O GINA ROSS** Employer identification number **23 7337381**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	▶ 0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶ 0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	▶ 0	

INTERNATIONAL ASSOCIATION FOR

Part III Statements About Activities (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e	Transfer of any part of its income or assets?		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		
	SEE STATEMENT 6		
b	Did the organization have a section 403(b) annuity plan for its employees?	X	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
b	Did the organization make any taxable distributions under section 4966?		X
c	Did the organization make a distribution to a donor, donor advisor, or related person?		X
d	Enter the total number of donor advised funds owned at the end of the tax year	►	0
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	►	0.
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	►	0.
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	►	0.

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **▶** _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					▶

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

INTERNATIONAL ASSOCIATION FOR

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	265.				265.
16 Membership fees received	49,279.	32,585.	39,638.	41,754.	163,256.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	80,600.	67,680.	60,627.	56,397.	265,304.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	31,906.	24,136.	23,010.	25,058.	104,110.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets			SEE STATEMENT 7 1,000.	2,069.	3,069.
23 Total of lines 15 through 22	162,050.	124,401.	124,275.	125,278.	536,004.
24 Line 23 minus line 17	81,450.	56,721.	63,648.	68,881.	270,700.
25 Enter 1% of line 23	1,621.	1,244.	1,243.	1,253.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a	N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	26b	N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e)	26c	N/A
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____	26d	N/A
e Public support (line 26c minus line 26d total)	26e	N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	N/A %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2005) 0. (2004) 0. (2003) 0. (2002) 0.		
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2005) 0. (2004) 0. (2003) 0. (2002) 0.		
c Add: Amounts from column (e) for lines: 15 265. 16 163,256. 17 265,304. 20 _____ 21 _____	27c	428,825.
d Add: Line 27a total 0. and line 27b total 0.	27d	0.
e Public support (line 27c total minus line 27d total)	27e	428,825.
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	27f	536,004.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	80.0041%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	19.4234%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

INTERNATIONAL ASSOCIATION FOR

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

INTERNATIONAL ASSOCIATION FOR

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.) **N/A**

(To be completed ONLY by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	If the amount on line 40 is -		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	The lobbying nontaxable amount is -		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000		
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.) **N/A**

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
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 other means			
i Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

INTERNATIONAL ASSOCIATION FOR

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

(i) Cash

(ii) Other assets

b Other transactions:

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: N/A

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ Yes No

b If "Yes," complete the following schedule: N/A

(a) Name of organization	(b) Type of organization	(c) Description of relationship



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IAMG Office Information
 4 Cataract St., Suite 310
 Kingston ON K7K 1Z7
 Canada
 E-mail: office@iamg.org
 FAX +1 613 531 0626
 Tel. +1 613 544 6878

IAMG Council

Officers and Members of Executive Committee

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 Editor of Monograph Series: JoAnne De Graffenreid

IAMG Office

Pamela Lyons

Addresses (in alphabetical order)

Frits P. Agterberg
 Geological Survey of Canada
 601 Booth Street
 Ottawa, Ontario K1A 0E8
 Canada
 Tel: +1 613 996 2374
 Home Tel. +1 613 728 0473
 Fax: +1 613 996 3726
 E-mail: agterber@NRCCan.gc.ca

Graeme F. Bonham-Carter
 Geological Survey of Canada
 601 Booth Street



Ottawa, Ontario K1A 0E8
Canada
Tel +1 613 996 3387
Fax +1 613 996 3726
E-mail gbonhamc@NRCan.gc.ca

Antonella Buccianti
Dipartimento di Scienze della Terra
Università di Firenze
Via La Pira 4 - 50121
Firenze,
Italy
Tel +39 55 2757496
Fax +39 55 284571
E-mail buccianti@unifi.it

Qiuming Cheng
Dept. of Earth and Space Science and Engineering
York University
4700 Keele Street
Toronto, Ontario M3J 1P3
Canada
Tel: +1 416 736 2100 (Ext: 22842)
Fax +1 416 736 5817
E-mail: qiuming@yorku.ca

also

LEMR Lab, China University of Geosciences
Tel: 86-1387-1563-488
Fax 86-27-6788-5096
E-mail. qiuming@cug.edu.cn

Jo Anne DeGraffenreid
P.O. Box 353
Baldwin City, KS 66006-0353
U.S.A
E-mail: msdeg@mchsi.com

Clayton V. Deutsch
University of Alberta
204C Civil/Electrical Eng. Bldg
Edmonton, Alberta T6G 2G7
Canada
Tel: +1 780 492 9916
Fax: +1 780 492 0249
E-mail: cdeutsch@ualberta.ca

Roussos Dimitrakopoulos
W.H. Bryan Mining Geology Research Centre
The University of Queensland
Brisbane Qld 4072
Australia
Tel: +61 7 3365 3472
Fax: +61 7 3365 7028
E-mail: roussos@uq.edu.au

Brigitte Doligez
Institut Français du Pétrole
1 et 4 avenue de Bois Preau
92506 Rueil-Malmaison, Cedex, France
Tel: +33 1 4752 7211
Fax: +33 1 4752 7067
E-mail: Brigitte.Doligez@ifp.fr

Nick Fisher
ValueMetrics
Suite 251, 184 Blues Point Road
McMahons Point, NSW 2060
Australia
Tel: +61 2 9922 1623 / +61 407 017 016
Fax: +61 2 9922 1635

E-mail: nif@valuemetrics.com.au

Carol A. Gotway Crawford
National Center for Environmental Health
MS E70
1600 Clifton Road NE
Atlanta, GA 30333
U S A
Tel: +1 404 498-1061
Fax: +1 404 498-1066
E-mail: cdg7@cdc.gov

Felix M. Gradstein
Geological and Paleontological Museum
University of Oslo
Sars'gate 1, N-0562, Oslo
Norway
Tel: +47 22 851 663
Fax: +47 22 851 832
E-mail: felix.gradstein@nhm.uio.no

Eric Grunsky
Geological Survey of Canada
601 Booth Street
Ottawa, Ontario K1A 0E8
Canada
Tel: +1 613 992 7258
Fax: +1 613 996 3726
E-mail: egrunsky@iamg.org

Michael Ed. Hohn
West Virginia Geological Survey
1 Mont Chateau Rd
Morgantown, WV
26508-8079 USA
Tel: +1 304 594 2331
Fax: +1 304 594 2575
E-mail: hohn@geosrv.wvnet.edu
Web page: <http://www.wvgs.wvnet.edu/www/hohn/>

Ian Jackson
British Geological Survey
Kingsley Dunham Centre, Keyworth
Nottingham, U.K. NG12 5GG
Tel: +44 115 936 3214
Fax: +44 115 936 3269
E-mail: ij@bgs.ac.uk

Pamela Lyons
4 Cataraqui Street, Suite 310
Kingston, Ontario K7K 1Z7
Canada
Tel: +1 613 544 6878
Fax: +1 613 531 0626
E-mail: plyons@eventsmgt.com

Dan F. Merriam
Kansas Geological Survey
University of Kansas
1930 Constant Avenue
Lawrence, KS 66047
U.S.A.
Tel: (785) 864-2127
Fax: (785) 864-5317
E-mail: dmerriam@kgs.ukans.edu

Ricardo A. Olea
507 Abilene Street
Lawrence, KS 66047
U.S.A.
Tel: +1 785 864 2095
E-mail: olea@unc.edu

Maria João Pereira
Instituto Superior Técnico - CMRP
Av. Rovisco Pais
1049-001 Lisboa
Portugal
Tel: +351 2184 17831
Fax: +351 2184 17389
E-mail: maria.pereira@ist.utl.pt

Harald S. Poelchau
10773 Lanett Circle
Dallas, TX 75238
U.S.A.
Tel: +1 214 221 1080
E-mail: hsp.iamg[at]inbox.com

Gina A. Ross
IAMG, c/o Gina Ross
PO Box 442504
Lawrence, KS 66044-8939
USA
Tel: +1 785 842 6092
E-mail: gr_iamg@hotmail.com

W. Edwin Sharp
Department of Geology
University of South Carolina
Columbia, SC 29208
U.S.A.
Tel: +1 803 728 2323
Fax: +1 803 777 6610
E-mail: editor@math.geol.sc.edu

[Back]

Co

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	1
DESCRIPTION		AMOUNT	
UNREALIZED GAIN (LOSS) ON INVESTMENTS			46,527.
TOTAL TO FORM 990, PART I, LINE 20			46,527.

FORM 990	CASH GRANTS AND ALLOCATIONS TO OTHERS	STATEMENT	2
CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS		AMOUNT	
AWARD IAMG STUDENT CHAPTER AT SOUTHERN ILLINOIS UNIVERSITY SOUTHERN ILLINOIS UNIVERSITY, MAIL CODE 4324, 1259 LINCOLN DRIVE CARBONDALE, IL 62901			2,000.
STUDENT CHAPTER EDMONTON CANADA 11630 87TH AVENUE EDMONTON, ALBERTA CANADA T6G 042			2,000.
STUDENT CHAPTER CHINA UNIVERSITY OF GEOSCIENCES CHINA UNIVERSITY OF CHINA, NO. 388, LUMO ROAD, HONGSHAN DISTRICT WUHAN CITY, HUBEI PROVINCE CHINA			3,000.
AWARD ERIC GRUNSKY 601 BOOTH STREET OTTAWA, ONTARIO K1A 0E8 CANADA			6,000.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22B			13,000.

FORM 990

CASH GRANTS AND ALLOCATIONS
TO INDIVIDUALS

STATEMENT 3

CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
STUDENT GRANT DEB PRASAD JAISI MIAMI UNIVERSITY, 114 SHIDELER HALL OXFORD, OH 45056-3656	NONE	1,000.
STUDENT GRANT JAMES D MCCARTHY UNIVERSITY OF WINDSOR, 401 SUNSET AVENUE WINDSOR, ONTARIO - N9B 3P4 CANADA	NONE	1,000.
STUDENT GRANT CORALIE GENTRY 1101 SOUTHWEST PARKWAY, APT. 406 COLLEGE STATION, TX 77840	NONE	1,000.
STUDENT GRANT ZHIJUN CHEN CHINA UNIVERSITY OF GEOSCIENCES, NO. 388 LUMO ROAD WUHAN CITY, HUBEI PROVINCE CHINA	NONE	1,000.
STUDENT GRANT HELWADE DINESH RAMAKANT INDIAN INSTITUTE OF TECHNOLOGY BOMBAY BOMBAY INDIA	NONE	400.
STUDENT GRANT ANTHONY STEVENS 516 S POLAR ST. APT#17 CARBONDALE, IL 62901	NONE	1,000.
STUDENT GRANT MA XIAOGANG CHINA UNIVERSITY OF CHINA, NO. 388, LUMO ROAD, HONGSHAN DISTRICT WUHAN 430074, HUBEI PROVINCE CHINA	NONE	400.
STUDENT AWARD WANG KUN CHINA UNIVERSITY OF CHINA, NO. 388, LUMO ROAD, HONGSHAN DISTRICT WUHAN 430074, HUBEI PROVINCE CHINA	NONE	400.

STUDENT AWARD	NONE	400.
JONATHAN W.F. REMO		
2300 S. ILLINOIS AVE. APT. 2B		
CARBONDALE, IL 62903		

TOTAL INCLUDED ON FORM 990, PART II, LINE 22B	6,600.
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FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE	STATEMENT	4
	PART III		

EXPLANATION

PROMOTION OF INTERNATIONAL COOPERATION IN THE APPLICATION AND USE OF MATHEMATICS IN GEOLOGICAL RESEARCH AND TECHNOLOGY.

FORM 990	NON-GOVERNMENT SECURITIES	STATEMENT	5
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SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
MUTUAL FUNDS	FMV			810,884.	810,884.
TO FORM 990, LINE 54A, COL B				810,884.	810,884.

SCHEDULE A	EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS	STATEMENT	6
	PART III, LINE 3A		

THE AWARDS COMMITTEE OF THE ASSOCIATION SEEKS NOMINATIONS AND SELECTS RECIPIENTS. MEMBERS OF THE AWARDS COMMITTEE ARE INELIGIBLE TO RECEIVE ANY AWARDS WHILE SERVING ON THE COMMITTEE.

SCHEDULE A	OTHER INCOME	STATEMENT	7
------------	--------------	-----------	---

DESCRIPTION	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT
MISCELLANEOUS	0.	0.	1,000.	2,069.
TOTAL TO SCHEDULE A, LINE 22	0.	0.	1,000.	2,069.

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶
 - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

Section 501(c)(3) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c)(3) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization INTERNATIONAL ASSOCIATION FOR MATHEMATICAL GEOLOGY C/O GINA ROSS	Employer identification number 23-7337381
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 442504	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LAWRENCE, KS 66044-8939	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **GINA ROSS**
 Telephone No. ▶ **(785) 842-6092** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a section 501(c)(3) corporation required to file Form 990-T) extension of time until **AUGUST 15, 2007**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year **2006** or
 ▶ tax year beginning _____, and ending _____

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions