

EXTENDED TO AUGUST 15, 2016

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.**2015**Open to Public
Inspection**A** For the 2015 calendar year, or tax year beginning

and ending

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

GLOBAL LINKS

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

700 TRUMBULL DRIVE

City or town, state or province, country, and ZIP or foreign postal code

PITTSBURGH, PA 15205

F Name and address of principal officer: KATHLEEN HOWER

SAME AS C ABOVE

D Employer identification number

52-1629060

E Telephone number

(412) 361-3424

G Gross receipts \$ 5,375,010.**H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: WWW.GLOBALLINKS.ORG**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: 1989 **M** State of legal domicile: PA**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: GLOBAL LINKS IS A NOT-FOR-PROFIT, MEDICAL RELIEF AND DEVELOPMENT ORGANIZATION	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 13
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 12
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5 20
	6	Total number of volunteers (estimate if necessary)	6 2200
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b 0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 3,683,915. Current Year 4,564,122.
	9	Program service revenue (Part VIII, line 2g)	0. 0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	41,521. 35,380.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	102,987. 122,593.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,828,423. 4,722,095.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,026,878. 2,990,736.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	812,138. 777,812.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 112,653.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	511,462. 469,628.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,350,478. 4,238,176.
	19	Revenue less expenses. Subtract line 18 from line 12	-522,055. 483,919.
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)
21		Total liabilities (Part X, line 26)	2,130,926. 1,764,322.
22		Net assets or fund balances. Subtract line 21 from line 20	5,368,935. 5,805,681.

Part II Signature Block

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: *Kathleen Hower* Date: 7-11-2016

▶ KATHLEEN HOWER, CHIEF EXECUTIVE OFFICER, CO-FOUNDER

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: RICHARD E. DYNOSKE

Preparer's signature: *[Signature]* Date: 8/11/16

Check ☐ if self-employed PTIN: P00095538

Firm's name: GROSSMAN YANAK & FORD LLP

Firm's EIN: 25-1638525

Firm's address: THREE GATEWAY CTR STE 1800

PITTSBURGH, PA 15222

Phone no. (412) 338-9300

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

532001 12-18-15

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2015)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2015)

GLOBAL LINKS

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Part III Statement of Program Service Accomplishments

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

☒ X

1 Briefly describe the organization's mission:

GLOBAL LINKS IS A NOT-FOR-PROFIT, MEDICAL RELIEF AND DEVELOPMENT ORGANIZATION DEDICATED TO SUPPORTING HEALTH IMPROVEMENT INITIATIVES IN RESOURCE-POOR COMMUNITIES AND PROMOTING ENVIRONMENTAL STEWARDSHIP IN THE U.S. HEALTHCARE SYSTEM.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 3,548,023. including grants of \$ 2,990,736.) (Revenue \$)

GLOBAL LINKS' INTERNATIONAL PROGRAMS HAVE SEVERAL COMPONENTS. THE LARGE-SCALE PROGRAMS ARE CURRENTLY FOCUSED IN SEVEN COUNTRIES IN THIS HEMISPHERE: BOLIVIA, CUBA, GUATEMALA, GUYANA, HAITI, HONDURAS AND NICARAGUA, AND THEY SUPPORT HOSPITALS AND CLINICS WITHIN THE COUNTRIES' PUBLIC HEALTH SYSTEMS, WHERE THE LARGEST SEGMENTS OF THE POPULATION RECEIVE CARE.

THE INTERNATIONAL MEDICAL AID PROGRAM IS DESIGNED AND IMPLEMENTED IN COLLABORATION WITH THE PAN AMERICAN HEALTH ORGANIZATION/WORLD HEALTH ORGANIZATION (PAHO/WHO) AND NATIONAL AND LOCAL HEALTH AUTHORITIES. THESE MEDICAL AID PROGRAMS PROVIDE EQUIPMENT, FURNISHINGS AND SUPPLIES TO PUBLIC HOSPITALS STRUGGLING TO PROVIDE EVEN BASIC CARE TO THEIR

4b (Code:) (Expenses \$ 410,726. including grants of \$) (Revenue \$)

GLOBAL LINKS' DOMESTIC PROGRAMS SUPPORT THE ENVIRONMENTAL SUSTAINABILITY EFFORTS OF MORE THAN 50 HOSPITALS AND HEALTH INSTITUTIONS IN THE PENNSYLVANIA TRI-STATE AREA, PROVIDE MEANINGFUL VOLUNTEER OPPORTUNITIES FOR GREATER-PITTSBURGH AREA RESIDENTS AND PROVIDE IMPORTANT MATERIALS FOR ORGANIZATIONS SUPPORTING UNINSURED AND UNDERINSURED POPULATIONS LOCALLY.

ENVIRONMENTAL STEWARDSHIP IN HEALTH: EVERY YEAR ACROSS THE UNITED STATES, MILLIONS OF TONS OF SURPLUS MEDICAL MATERIALS ENTER U.S. LANDFILLS DUE TO HOSPITAL REGULATIONS, CHANGES IN VENDORS, UPGRADES, OR DOWNSIZING. AT THE SAME TIME, STRUGGLING HEALTH FACILITIES AROUND THE WORLD CANNOT AFFORD TO PROVIDE ALL THAT IS NEEDED TO ADEQUATELY CARE

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

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

4e Total program service expenses **3,958,749.**

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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		X
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		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		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		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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	X	
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	X	
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		X
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		X
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	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
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):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
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		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 1a 8		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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 20		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	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)?		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 Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	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:		
a	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		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		

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 in Schedule O. See instructions.

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

☒**Section A. Governing Body and Management**

	1a	1b	13	12	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 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 in Schedule O.			13			
b Enter the number of voting members included in line 1a, above, who are independent		1b		12		
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		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?				3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?				5		X
6 Did the organization have members or stockholders?				6		X
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		X
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		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
a The governing body?				8a	X	
b Each committee with authority to act on behalf of the governing body?				8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a														X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b													
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			11a		X										
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		X								
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?					12b		X								
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done					12c		X								
13 Did the organization have a written whistleblower policy?					13		X								
14 Did the organization have a written document retention and destruction policy?					14		X								
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?															
a The organization's CEO, Executive Director, or top management official					15a		X								
b Other officers or key employees of the organization					15b						X				
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							X			
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 exempt status with respect to such arrangements?					16b										

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **PA, WI, WA, OH**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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: **►**
DONALD TINKER - (412) 361-3424
700 TRUMBULL DRIVE, PITTSBURGH, PA 15205

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.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

[illegible]

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 7,833.				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 32,122.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 4,524,167.				
	g Noncash contributions included in lines 1a-1f: \$	3,509,080.				
	h Total. Add lines 1a-1f		4,564,122.			
Program Service Revenue	Business Code					
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		37,950.			37,950.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real (ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	627,220.			
	b Less: cost or other basis and sales expenses		629,790.			
	c Gain or (loss)		-2,570.			
	d Net gain or (loss)		-2,570.	-2,570.		
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a 50,225.				
	b Less: direct expenses	b 23,125.				
	c Net income or (loss) from fundraising events		27,100.			27,100.
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a 95,493.					
b Less: cost of goods sold	b 0.					
c Net income or (loss) from sales of inventory		95,493.	95,493.			
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.		4,722,095.	92,923.	0.	65,050.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	102,934.	102,934.		
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	2,887,802.	2,887,802.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	69,000.	69,000.		
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	646,883.	461,873.	94,671.	90,339.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	61,929.	49,621.	5,261.	7,047.
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	300.		300.	
c Accounting	27,943.	12,526.	14,170.	1,247.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	5,651.		5,651.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	180.	180.		
12 Advertising and promotion				
13 Office expenses	16,618.	14,264.	2,314.	40.
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	25,398.	22,729.	2,662.	7.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	41,011.	39,371.	1,640.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	70,997.	69,193.	1,804.	
23 Insurance	23,853.		23,853.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a POSTAGE & SHIPPING	158,391.	158,209.	182.	
b WAREHOUSE AND OFFICE RE	62,576.	58,998.	3,578.	
c PRINTING, DUES, & PUBLI	14,135.	126.	2,966.	11,043.
d OUTREACH ACTIVITIES	7,508.	7,508.		
e All other expenses	15,067.	4,415.	7,722.	2,930.
25 Total functional expenses. Add lines 1 through 24e	4,238,176.	3,958,749.	166,774.	112,653.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	38,588.	1	49,449.
	2 Savings and temporary cash investments	860,812.	2	312,231.
	3 Pledges and grants receivable, net	29,885.	3	17,556.
	4 Accounts receivable, net	37,285.	4	39,887.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	3,273,042.	8	3,879,907.
	9 Prepaid expenses and deferred charges	39,727.	9	34,788.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,658,886.		
	b Less: accumulated depreciation	10b 338,149.	10c	2,320,737.
	11 Investments - publicly traded securities	816,418.	11	897,770.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	27,473.	15	17,678.
16 Total assets. Add lines 1 through 15 (must equal line 34)	7,499,861.	16	7,570,003.	
Liabilities	17 Accounts payable and accrued expenses	25,589.	17	26,464.
	18 Grants payable		18	
	19 Deferred revenue	545,337.	19	297,858.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,560,000.	23	1,440,000.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	2,130,926.	26	1,764,322.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,318,141.	27	5,776,525.
	28 Temporarily restricted net assets	50,794.	28	29,156.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	5,368,935.	33	5,805,681.	
34 Total liabilities and net assets/fund balances	7,499,861.	34	7,570,003.	

Form 990 (2015)

Part XI Reconciliation of Net AssetsCheck 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	4,722,095.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,238,176.
3	Revenue less expenses. Subtract line 2 from line 1	3	483,919.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,368,935.
5	Net unrealized gains (losses) on investments	5	-47,172.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,805,682.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2015)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

Employer identification number

GLOBAL LINKS

52-1629060

Part 1	Reason for Public Charity Status (All organizations must complete this part.) See instructions.
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The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ 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).**
- 4 ☐ 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: _____
- 5 ☐ 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).**
- 7 ☒ 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.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ 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.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **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.**
- 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.**
- 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.**
- d ☐ **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.**
- e ☐ 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.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 532021 09-23-15

Schedule A (Form 990 or 990-EZ) 2015

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5036899.	5622320.	6189760.	3683915.	4564123.	25097017.
2 Tax revenues levied for the organization'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						
4 Total. Add lines 1 through 3	5036899.	5622320.	6189760.	3683915.	4564123.	25097017.
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)						
6 Public support. Subtract line 5 from line 4						25097017.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	5036899.	5622320.	6189760.	3683915.	4564123.	25097017.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	30,871.	55,573.	41,642.	45,577.	37,950.	211,613.
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.)						
11 Total support. Add lines 7 through 10						25308630.
12 Gross receipts from related activities, etc. (see instructions)					12	22,513.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	99.16	%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	99.28	%
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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 five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of 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 (b) and (c) 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")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) 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 (b) and (c) 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 (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).
- 8 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 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		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV. Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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		

Section 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		

Section 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 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 the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), 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 supported organizations played in this regard.		
3		

Section 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):			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.			
a 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 that these activities constituted substantially all of its activities.	Yes	No	
2a			
b Did the activities described in (a) 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 (a) and (b) below.			
a 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? Provide details in Part VI.			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	

Section 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	
e	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 1-1/2% 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 .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

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 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.▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015Open to Public
Inspection

Name of the organization

GLOBAL LINKS

Employer identification number

52-1629060

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

c Beginning balance

	Amount
1c	
1d	
1e	
1f	

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

1a Beginning of year balance

b Contributions

c Net investment earnings, gains, and losses

d Grants or scholarships

e Other expenditures for facilities and programs

f Administrative expenses

g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
1b					
1c					
1d					
1e					
1f					
1g					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ %

b Permanent endowment ☐ %

c Temporarily restricted endowment ☐ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI 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				
1b Buildings		2,485,770.	197,137.	2,288,633.
1c Leasehold improvements				
1d Equipment		173,116.	141,012.	32,104.
1e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,320,737.

Schedule D (Form 990) 2015

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-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-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.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue 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	4,674,922.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-47,172.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	-47,172.
3	Subtract line 2e from line 1	3	4,722,094.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,722,094.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	4,238,176.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	4,238,176.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,238,176.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPALS, THE ORGANIZATION ACCOUNTS FOR UNCERTAIN TAX POSITIONS RELATIVE TO UNRELATED BUSINESS INCOME, IF ANY, AS REQUIRED. USING THAT GUIDANCE, MANAGEMENT HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

SCHEDULE F
(Form 990)Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015**Open to Public
Inspection**

Name of the organization

Employer identification number

GLOBAL LINKS

52-1629060

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	DONATIONS OF MEDICAL SUPPLIES	2,088,062.
SOUTH AMERICA			PROGRAM SERVICES	DONATIONS OF MEDICAL SUPPLIES	
				LIST TOTAL 369024	348,651.
VARIOUS			PROGRAM SERVICES	DONATIONS OF MEDICAL SUPPLIES	544,401.
3 a Sub-total	0	0			2,981,114.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			2,981,114.

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

Schedule F (Form 990) 2015

Part II. Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA		0.		63,952.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		81,119.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		712.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		21,128.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		25,936.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		19,012.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		14,102.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		15,432.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **▲**

3 Enter total number of other organizations or entities **▲**

Part I Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA		0.		16,919.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		15,106.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		SOUTH AMERICA		0.		75,233.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		53,860.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		22,364.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		1,834.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		2,654.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		230,858.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		276,580.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN		0.		58,125.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		24,370.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		64,024.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		5,758.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		12,588.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		62,111.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		18,505.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		11,497.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		13,245.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN		0.		5,245.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		5,245.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		3,934.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		71,224.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		136,661.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		99,462.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		167,594.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		91,353.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		23,392.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN		0.		29,427.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		29,308.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		53,515.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		38,898.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		55,259.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		15,312.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		20,967.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		20,183.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		15,913.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET

Part II. Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN		0.		2,175.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		15,246.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		775.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		20,962.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		14,849.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		125.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		125.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		125.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		1,243.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET

Part II. Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA/CARIBBEAN		0.		82,685.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		12,809.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		9,996.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		53,067.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		21,057.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		18,235.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		17,248.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		16,942.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET
		CENTRAL AMERICA/CARIBBEAN		0.		59,132.	PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND	SALE OF COMPARABLE PRODUCTS ON THE OPEN MARKET

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) ☐ Yes ☒ No

Schedule F (Form 990) 2015

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

MATERIAL ASSISTANCE IS MONITORED IN TWO WAYS, AN ASSESSMENT OF THE FACILITY THAT IS REQUESTING MATERIALS IS TYPICALLY PERFORMED BEFORE A SHIPMENT IS SENT SO THE TRUE NEEDS AND CAPABILITIES OF THE FACILITY ARE KNOWN; THIS INCLUDES DEVELOPING AN EXTENSIVE NEEDS LIST. A COMPLETE DONATION LIST IS SENT TO THE RECEIVING INSTITUTION; THEY ARE ASKED TO CONFIRM RECEIPT AND COMPLETE AN EVALUATION OF THE MATERIALS RECEIVED NOTING ANY PROBLEMS OR CONCERNS. GLOBAL LINKS STAFF USUALLY FOLLOW-UP WITH A VISIT TO THE INSTITUTION ON THE NEXT TRIP TO THE COUNTRY.

PART I, LINE 3:

SALES OF COMPARABLE PRODUCTS ON THE OPEN MARKET

PART II, COLUMN (H):

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC HEALTH SYSTEM

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC HEALTH SYSTEM

REGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

HEALTH SYSTEMREGION: SOUTH AMERICA

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
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HEALTH SYSTEM

REGION: SOUTH AMERICA

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(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
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HEALTH SYSTEM

REGION: CENTRAL AMERICA/CARIBBEAN

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IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
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HEALTH SYSTEM**REGION: CENTRAL AMERICA/CARIBBEAN**

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IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
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REGION: CENTRAL AMERICA/CARIBBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
HEALTH SYSTEM

REGION: CENTRAL AMERICA/CARIBBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
HEALTH SYSTEM

REGION: CENTRAL AMERICA/CARIBBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

HEALTH SYSTEMREGION: CENTRAL AMERICA/CARIBBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
HEALTH SYSTEM

REGION: CENTRAL AMERICA/CARIBBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
HEALTH SYSTEM

REGION: CENTRAL AMERICA/CARIBBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
HEALTH SYSTEM

REGION: CENTRAL AMERICA/CARIBBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
HEALTH SYSTEM

REGION: CENTRAL AMERICA/CARIBBEAN

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
HEALTH SYSTEM

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

REGION: VARIOUS

(H) DESCRIPTION OF NON-CASH ASSISTANCE: PROVIDE MATERIALS FOR THE
IMPROVEMENT OF PATIENT CARE AND TO BUILD CAPACITY WITHIN THE PUBLIC
HEALTH SYSTEM

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1 DIA DE LOS MUERTOS CELE	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
	(event type)	(event type)	(total number)	
Revenue				
1 Gross receipts	50,225.			50,225.
2 Less: Contributions				
3 Gross income (line 1 minus line 2)	50,225.			50,225.
Direct Expenses				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages	8,281.			8,281.
8 Entertainment	7,409.			7,409.
9 Other direct expenses	7,435.			7,435.
10 Direct expense summary. Add lines 4 through 9 in column (d)				23,125.
11 Net income summary. Subtract line 10 from line 3, column (d)				27,100.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				
8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
- ☐
- Yes
- ☐
- No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

- 16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer☐ Employee☐ Independent contractor

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Part IV Supplemental Information (continued)

Lined area for supplemental information.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

GLOBAL LINKS

Employer identification number

52-1629060

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDICAL EQUIPMENT RECYCLING PROGRAM (UPMC) - 2200 MEMORIAL DR. - FARRELL, PA 16121	25-1423657	501(C)(3)	0.	19,350.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	THE MATERIAL DONATED TO MEDICAL EQUIPMENT RECYCLING PROGRAM (UPMC) WAS PROVIDED TO IMPROVE
AMERICAN RED CROSS OF WESTERN PA 2801 LIBERTY AVE PITTSBURGH, PA 15222	53-0196605	501(C)(3)	0.	2,066.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	DONATION OF IN-KIND HOMECARE, MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT
HABITAT FOR HUMANITY RESTORE 212 YOST BLVD PITTSBURGH, PA 15221	25-1529652	501(C)(3)	0.	5,373.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	DONATION OF IN-KIND HOMECARE, MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT
CHOSEN INTERNATIONAL MEDICAL ASSISTANCE - 3638 W. 26TH STREET - ERIE, PA 16506	25-1451706	501(C)(3)	0.	22,580.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	DONATION OF IN-KIND HOMECARE, MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT
DRESS FOR SUCCESS PITTSBURGH THE DESIGN CENTER, 5001 BAUM BOULEVARD, SUITE 500 - PITTSBURGH, PA 15213	20-2388089	501(C)(3)	0.	6,127.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	DONATION OF IN-KIND HOMECARE, MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT
OFF THE FLOOR PITTSBURGH 901 ALLEGHENY AVENUE PITTSBURGH, PA 15233	45-5436414	501(C)(3)	0.	8,075.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	DONATION OF IN-KIND HOMECARE, MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

0.

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

Schedule I (Form 990) (2015)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER PRINCE WILLIAM AREA COMMUNITY HEALTH CENTER INC - 4379 RIDGEWOOD CENTER DRIVE, SUITE 102 - WOODBRIDE, VA 22192	83-0435138	501(C)(3)	0.	5,000.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	DONATION OF IN-KIND HOMECARE, MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT
BLAND COUNTY MEDICAL CLINIC 12301 GRAPEFIELD RD BASTIAN, VA 24314	54-1074890	501(C)(3)	0.	6,251.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	DONATION OF IN-KIND HOMECARE, MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT
OPERATION SAFETY NET, MERCY COMMUNITY HEALTH - 1518 FORBES AVENUE - PITTSBURGH, PA 15219	25-1604115	501(C)(3)	0.	7,184.	FMV	MEDICAL EQUIPMENT, FURNISHINGS & SUPPLIES	DONATION OF IN-KIND HOMECARE, MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

GLOBAL LINKS WILL ONLY DONATE MATERIALS TO U.S. ORGANIZATIONS WITH WHOM IT
IS FAMILIAR; THAT IS, WE UNDERSTAND AND APPRECIATE THEIR MISSION AND THEIR
APPROACH TO ACCOMPLISHING THAT MISSION.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

MEDICAL EQUIPMENT RECYCLING PROGRAM (UPMC)

(H) PURPOSE OF GRANT OR ASSISTANCE: THE MATERIAL DONATED TO MEDICAL

Part IV Supplemental Information

EQUIPMENT RECYCLING PROGRAM (UPMC) WAS PROVIDED TO IMPROVE HEALTH,
COMMUNITY SERVICES, OR TRAINING PROGRAMS OF A HEALTH-CARE FACILITY,
SOCIAL SERVICE AGENCY OR SCHOOL IN THE UNITED STATES.

NAME OF ORGANIZATION OR GOVERNMENT: AMERICAN RED CROSS OF WESTERN PA

(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION OF IN-KIND HOMECARE,
MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT MISSION OF THESE
NONPROFITS

NAME OF ORGANIZATION OR GOVERNMENT: HABITAT FOR HUMANITY RESTORE

(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION OF IN-KIND HOMECARE,
MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT MISSION OF THESE
NONPROFITS

NAME OF ORGANIZATION OR GOVERNMENT:

CHOSEN INTERNATIONAL MEDICAL ASSISTANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION OF IN-KIND HOMECARE,
MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT MISSION OF THESE
NONPROFITS

NAME OF ORGANIZATION OR GOVERNMENT: DRESS FOR SUCCESS PITTSBURGH

(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION OF IN-KIND HOMECARE,
MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT MISSION OF THESE
NONPROFITS

NAME OF ORGANIZATION OR GOVERNMENT: OFF THE FLOOR PITTSBURGH

(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION OF IN-KIND HOMECARE,
MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT MISSION OF THESE

Part IV Supplemental InformationNONPROFITSNAME OF ORGANIZATION OR GOVERNMENT:GREATER PRINCE WILLIAM AREA COMMUNITY HEALTH CENTER INC(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION OF IN-KIND HOMECARE,MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT MISSION OF THESENONPROFITSNAME OF ORGANIZATION OR GOVERNMENT: BLAND COUNTY MEDICAL CLINIC(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION OF IN-KIND HOMECARE,MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT MISSION OF THESENONPROFITSNAME OF ORGANIZATION OR GOVERNMENT:OPERATION SAFETY NET, MERCY COMMUNITY HEALTH(H) PURPOSE OF GRANT OR ASSISTANCE: DONATION OF IN-KIND HOMECARE,MOBILITY AND OFFICE FURNISHINGS AND EQUIPMENT TO SUPPORT MISSION OF THESENONPROFITS

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public
Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

GLOBAL LINKS

Employer identification number

52-1629060

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies	X	1,010	3,504,826	SALE OF COMPARABLE P
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it
must hold for at least three years from the date of the initial contribution, and which is not required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

	Yes	No
30a		X
31		X
32a		X
33		

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

Schedule M (Form 990) (2015)

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

GLOBAL LINKS

Employer identification number
52-1629060

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DEDICATED TO IMPROVING HEALTH IN RESOURCE-POOR COMMUNITIES LOCALLY AND
GLOBALLY, AND TO PROMOTING BETTER ENVIRONMENTAL STEWARDSHIP WITHIN THE
U.S. HEALTHCARE SYSTEM.

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

PATIENTS. ALMOST ALL OF THE MATERIALS DELIVERED THROUGH THIS PROGRAM
ARE MEDICAL SURPLUS RECOVERED FROM U.S. HOSPITALS AND HEALTH
INSTITUTIONS. THESE MATERIALS PROVIDE THE TOOLS FOR BETTER HEALTH CARE
SERVICES BY THE HOSPITALS AND CLINICS IN THE COMMUNITIES THEY SERVE.
WELL-PLANNED AND COORDINATED SHIPMENTS, DELIVERED WITHIN A FRAMEWORK OF
PUBLIC HEALTH INITIATIVES, BUILD CAPACITY INSIDE THE PUBLIC HEALTH
SYSTEM, AND SUPPORT EFFORTS TOWARD UNIVERSAL ACCESS TO HEALTH.

IN 2015, GLOBAL LINKS PROVIDED 24 40-FT TRAILER-LOADS OF MEDICAL
MATERIAL AID TO SUPPORT MORE THAN 74 FACILITIES, PRIMARILY HOSPITALS
AND CLINICS, IN SEVEN COUNTRIES IN THE WESTERN HEMISPHERE. THE COMBINED
VALUE OF THOSE MATERIALS WAS APPROXIMATELY \$2.5 MILLION. GLOBAL LINKS
ALSO SUPPORTED 2 INTERNATIONAL MEDICAL LEARNING EXCHANGES IN PEDIATRIC
NEUROSURGERY FROM CUBA, AND MEDICAL EDUCATION FROM NICARAGUA.

OUR INTERNATIONAL SUTURE DONATION PROGRAM PROVIDES THOUSANDS OF PACKS
OF SUTURES - USED IN CLOSING WOUNDS FROM ACCIDENTS, AND INCISIONS
DURING SURGERY - EVERY YEAR TO HOSPITALS AND CLINICS AROUND THE WORLD.
IN 2015, 33 CLINICS AND HOSPITALS IN 19 COUNTRIES RECEIVED LIFESAVING
DONATIONS OF SUTURES.

Name of the organization

GLOBAL LINKS

Employer identification number

52-1629060

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

FOR THEIR COMMUNITIES. THE STEWARDSHIP PROGRAM DIRECTLY ADDRESSES BOTH SITUATIONS BY HELPING U.S. INSTITUTIONS ASSESS THE CAUSES OF SURPLUS IN THE SYSTEM, REDUCE IT WHEN POSSIBLE, AND PROVIDE A RESPONSIBLE ALTERNATIVE TO DISPOSAL FOR REMAINING SURPLUS. USEFUL MATERIALS ARE RECOVERED, PROCESSED, AND PROVIDED TO INSTITUTIONS SERVING VULNERABLE POPULATIONS BOTH LOCALLY AND AROUND THE WORLD. IN 2015, GLOBAL LINKS PERFORMED 75 HOSPITAL TRAININGS/IN-SERVICES REACHING HUNDREDS OF STAFF MEMBERS. MORE THAN 300 TONS OF SURPLUS MATERIALS WERE RECOVERED FROM HEALTH FACILITIES IN THE TRI-STATE AREA, AND AN ADDITIONAL 9 TONS OF HEALTH-RELATED MATERIALS WERE RECOVERED DIRECTLY FROM THE COMMUNITY.

GLOBAL LINKS' VOLUNTEER PROGRAM OFFERS MORE THAN 2,200 INDIVIDUALS EVERY YEAR AN OPPORTUNITY TO IMPACT GLOBAL HEALTH AND THE PLANET, AND PARTICIPATE IN GLOBAL CITIZENRY. VOLUNTEERS SORT AND PACK THOUSANDS OF BOXES OF SUPPLIES, CLEAN AND REPAIR MOBILITY DEVICES AND EQUIPMENT, AND CLASSIFY, SORT, AND PACK SURGICAL INSTRUMENTS; AND ASSESS, REPAIR AND PACK DIAGNOSTIC AND TREATMENT EQUIPMENT, ALL FOR DEPLOYMENT IN UNDERSERVED COMMUNITIES AROUND THE GLOBE. VOLUNTEERS FROM EVERY WALK OF LIFE, INCLUDING BOTH MEDICAL PROFESSIONALS AND LAY PEOPLE, PROVIDE OVER 14,000 HOURS OF SERVICE WHILE LEARNING ABOUT ISSUES SURROUNDING GLOBAL HEALTH, INTERNATIONAL AID, ENVIRONMENTAL SUSTAINABILITY, AND POVERTY, HELPING THEM TO BE MORE INFORMED GLOBAL CITIZENS.

IN 2015, THE COMMUNITY PARTNERS PROGRAM PROVIDED MATERIAL SUPPORT TO 36 ORGANIZATIONS IN THE MID ATLANTIC REGION THAT RECEIVED A VARIETY OF PRODUCTS VALUED AT \$103,000, INCLUDING SUCH ITEMS AS CLINICAL AND

Name of the organization

GLOBAL LINKS

Employer identification number

52-1629060

OFFICE FURNISHINGS, MEDICAL SUPPLIES AND EQUIPMENT, MOBILITY DEVICES,
FORMULA AND HOME FEEDING SUPPLIES, MATERIALS FOR USE IN ART AND
EDUCATIONAL PROJECTS, AND SURGICAL SCRUBS FOR LOW-INCOME INDIVIDUALS
ENTERING THE MEDICAL WORKFORCE.

FORM 990, PART VI, SECTION B, LINE 11:

THE BOARD OF DIRECTORS REVIEWS THE FORM 990 FOR COMPLETENESS AND ACCURACY
BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS MEETS SIX TIMES PER YEAR. AT THESE MEETINGS, ANY
CONFLICTS OF INTEREST ARE DISCUSSED WITH THE DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 15A:

THE PERSONNEL COMMITTEE OF THE BOARD EVALUATES THE CEO'S PERFORMANCE BASED
ON A SELF-EVALUATION AND ON GOALS THAT WERE SET THE PREVIOUS YEAR. THE
BOARD THEN REVIEWS THE COMPENSATION AND VOTES ON ANY CHANGE IN
COMPENSATION. NO OTHER OFFICERS RECEIVE COMPENSATION. THERE ARE NO KEY
EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

SCHEDULE O, PART XII, LINE 2C: THE AUDIT COMMITTEE SELECTS THE
INDEPENDENT ACCOUNTANT AND REVIEWS THE AUDIT, DISCUSSING ANY AREAS OF
CONCERN WITH THE INDEPENDENT ACCOUNTANT AND GLOBAL LINKS' STAFF.

Name of the organization

GLOBAL LINKS

Employer identification number

52-1629060

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box ☒ **X**

• 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.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

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

A corporation 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.

Type or print	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number
	GLOBAL LINKS	Employer identification number (EIN) or
	Number, street, and room or suite no. If a P.O. box, see instructions.	52-1629060
	700 TRUMBULL DRIVE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	PITTSBURGH, PA 15205	

Enter the Return code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

DONALD TINKER

• The books are in the care of ► **700 TRUMBULL DRIVE - PITTSBURGH, PA 15205**

Telephone No. ► **(412) 361-3424**

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 is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2016**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► ☒ calendar year **2015** or

► ☐ tax year beginning , and ending .

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

global links

**FINANCIAL STATEMENTS AND
SUPPLEMENTARY INFORMATION**

Years Ended December 31, 2015 and 2014

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To the Board of Directors
Global Links
Pittsburgh, Pennsylvania

Independent Auditor's Report

Report on the Financial Statements

We have audited the accompanying financial statements of Global Links (a nonprofit organization) (the "Organization"), which comprise the statements of financial position as of December 31, 2015 and 2014, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Organization's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Global Links as of December 31, 2015 and 2014, and the results of its activities, functional expenses, and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Other Matter

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The Schedule of Activities by Asset Class with Comparative Totals is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information included in this report is fairly stated, in all material respects, in relation to the financial statements as a whole.

Herbein + Company, Inc.

Pittsburgh, Pennsylvania
April 27, 2016

Global Links

Statements of Financial Position

	December 31	
	2015	2014
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	\$ 350,997	\$ 786,329
Investments, at fair value	908,453	929,489
Accounts receivable	39,887	37,285
Contributions receivable	17,556	29,885
Inventory	3,879,907	3,273,042
Prepaid expenses	34,788	39,727
TOTAL CURRENT ASSETS	<u>5,231,588</u>	<u>5,095,757</u>
PROPERTY AND EQUIPMENT		
Building and improvements	2,485,770	2,475,871
Furniture, fixtures, and equipment	173,116	181,664
	<u>2,658,886</u>	<u>2,657,535</u>
Accumulated depreciation and amortization	(338,149)	(280,904)
NET PROPERTY AND EQUIPMENT	<u>2,320,737</u>	<u>2,376,631</u>
OTHER ASSETS		
Contributions receivable	11,600	20,909
Loan origination fees, net of accumulated amortization (2015 - \$1,459; 2014 - \$973)	6,078	6,564
TOTAL ASSETS	<u><u>\$ 7,570,003</u></u>	<u><u>\$ 7,499,861</u></u>
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable and accrued expenses	\$ 26,464	\$ 25,589
Deferred revenue	297,858	545,337
Current portion of long-term debt	120,000	120,000
TOTAL CURRENT LIABILITIES	<u>444,322</u>	<u>690,926</u>
NONCURRENT LIABILITIES		
Long-term debt	1,320,000	1,440,000
TOTAL LIABILITIES	<u>1,764,322</u>	<u>2,130,926</u>
NET ASSETS		
Unrestricted	5,776,525	5,318,141
Temporarily restricted	29,156	50,794
TOTAL NET ASSETS	<u>5,805,681</u>	<u>5,368,935</u>
TOTAL LIABILITIES AND NET ASSETS	<u><u>\$ 7,570,003</u></u>	<u><u>\$ 7,499,861</u></u>

See accompanying notes.

Global Links

Statement of Activities and Changes in Net Assets

Year Ended December 31, 2015

	Unrestricted	Temporarily Restricted	Total
REVENUE AND OTHER SUPPORT			
Donated materials and supplies	\$ 3,504,826	\$ -	\$ 3,504,826
Contributions and grants	1,055,042	-	1,055,042
Miscellaneous sales and other	95,493	-	95,493
Interest and dividends	37,950	-	37,950
Realized loss on investments	(2,571)	-	(2,571)
Net unrealized depreciation of investments	(47,172)	-	(47,172)
Special event, net of expense of \$23,125	27,100	-	27,100
In-kind contributions	4,254	-	4,254
TOTAL REVENUE AND OTHER SUPPORT	4,674,922	-	4,674,922
NET ASSETS RELEASED FROM RESTRICTIONS	21,638	(21,638)	-
OPERATING EXPENSES			
Program services	3,958,749	-	3,958,749
Management and general	166,774	-	166,774
Fundraising	112,653	-	112,653
TOTAL OPERATING EXPENSES	4,238,176	-	4,238,176
CHANGE IN NET ASSETS	458,384	(21,638)	436,746
NET ASSETS AT BEGINNING OF YEAR	5,318,141	50,794	5,368,935
NET ASSETS AT END OF YEAR	<u>\$ 5,776,525</u>	<u>\$ 29,156</u>	<u>\$ 5,805,681</u>

See accompanying notes.

Global Links

Statement of Activities and Changes in Net Assets

Year Ended December 31, 2014

	Unrestricted	Temporarily Restricted	Total
REVENUE AND OTHER SUPPORT			
Donated materials and supplies	\$ 2,672,761	\$ -	\$ 2,672,761
Contributions and grants	1,002,516	8,638	1,011,154
Miscellaneous sales and other	92,315	-	92,315
Interest and dividends	45,577	-	45,577
Realized loss on investments	(4,056)	-	(4,056)
Net unrealized appreciation of investments	2,009	-	2,009
Special event, net of expense of \$10,477	10,672	-	10,672
In-kind contributions	4,862	-	4,862
TOTAL REVENUE AND OTHER SUPPORT	3,826,656	8,638	3,835,294
NET ASSETS RELEASED FROM RESTRICTIONS	489,113	(489,113)	-
OPERATING EXPENSES			
Program services	4,000,179	-	4,000,179
Management and general	237,273	-	237,273
Fundraising	113,026	-	113,026
TOTAL OPERATING EXPENSES	4,350,478	-	4,350,478
CHANGE IN NET ASSETS	(34,709)	(480,475)	(515,184)
NET ASSETS AT BEGINNING OF YEAR	5,352,850	531,269	5,884,119
NET ASSETS AT END OF YEAR	\$ 5,318,141	\$ 50,794	\$ 5,368,935

See accompanying notes.

Global Links

Statement of Functional Expenses

Year Ended December 31, 2015

	Program Services	Management and General	Fundraising	Total Expenses
Materials, supplies, and equipment shipped	\$ 2,990,736	\$ -	\$ -	\$ 2,990,736
Personnel salaries and wages	530,873	94,671	90,339	715,883
Personnel benefits	49,621	5,261	7,047	61,929
Depreciation and amortization	69,193	1,804	-	70,997
Consulting and professional fees	14,154	22,026	4,177	40,357
	-	-	-	-
Office supplies and expenses	14,264	2,314	40	16,618
Outreach activities	7,508	-	-	7,508
Postage and delivery	424	182	-	606
Miscellaneous	109	5,817	-	5,926
Printing, dues, and publications	126	2,966	11,043	14,135
	-	-	-	-
Insurance	-	23,853	-	23,853
Shipping costs	157,785	-	-	157,785
Warehouse expenses and office rent	58,998	3,578	-	62,576
Interest expense	39,371	1,640	-	41,011
Travel, conferences, and training	22,729	2,662	7	25,398
	-	-	-	-
Equipment repair	2,858	-	-	2,858
TOTAL EXPENSES	\$ 3,958,749	\$ 166,774	\$ 112,653	\$ 4,238,176

See accompanying notes.

Global Links

Statement of Functional Expenses

Year Ended December 31, 2014

	Program Services	Management and General	Fundraising	Total Expenses
Materials, supplies, and equipment shipped	\$ 3,026,878	\$ -	\$ -	\$ 3,026,878
Personnel salaries and wages	552,962	116,477	88,126	757,565
Personnel benefits	42,093	5,598	6,882	54,573
Depreciation and amortization	68,889	2,697	-	71,586
Consulting and professional fees	12,885	26,451	1,825	41,161
Office supplies and expenses	15,800	3,902	100	19,802
Outreach activities	7,163	-	-	7,163
Postage and delivery	486	454	-	940
Miscellaneous	270	39,810	9	40,089
Printing, dues, and publications	506	2,860	16,029	19,395
Insurance	-	27,631	-	27,631
Shipping costs	153,997	-	-	153,997
Warehouse expenses and office rent	59,718	2,950	-	62,668
Building related expenses, including interest expense	42,019	1,751	-	43,770
Travel, conferences, and training	13,296	6,692	55	20,043
Equipment repair	3,217	-	-	3,217
TOTAL EXPENSES	\$ 4,000,179	\$ 237,273	\$ 113,026	\$ 4,350,478

See accompanying notes.

Global Links

Statements of Cash Flows

	Year Ended December 31	
	2015	2014
CASH FLOWS FROM OPERATING ACTIVITIES		
Increase (decrease) in net assets	\$ 436,746	\$ (515,184)
Adjustments to reconcile increase (decrease) in net assets to net cash provided (used) by operating activities:		
Depreciation and amortization	70,997	71,586
Unrealized (appreciation) depreciation of investments	47,172	(2,009)
Realized loss on sale of investments	2,571	4,056
Gain on sale of fixed assets	(4,000)	
Changes in:		
Accounts receivable	(2,602)	44,110
Contributions receivable	21,638	480,475
Grants receivable	-	10,000
Inventory	(606,865)	277,273
Prepaid expenses	4,939	(11,001)
Accounts payable and accrued expenses	875	(120,306)
Deferred revenue	(247,479)	(47,421)
NET CASH PROVIDED (USED) BY OPERATING ACTIVITIES	(276,008)	191,579
CASH FLOWS FROM INVESTING ACTIVITIES		
Proceeds from sale of investments	627,220	301,752
Purchase of investments	(655,927)	(345,195)
Proceeds from sale of property and equipment	4,000	-
Additions to property and equipment:		
Building and improvements	(9,899)	(57,716)
Furniture, fixtures, and equipment	(4,718)	(21,078)
NET CASH PROVIDED (USED) BY INVESTING ACTIVITIES	(39,324)	(122,237)
CASH FLOWS FROM FINANCING ACTIVITIES		
Repayment of long-term debt	(120,000)	(120,000)
NET DECREASE IN CASH	(435,332)	(50,658)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR	786,329	836,987
CASH AND CASH EQUIVALENTS AT END OF YEAR	\$ 350,997	\$ 786,329
SUPPLEMENTAL DISCLOSURES OF CASH FLOW INFORMATION		
Cash paid during the year for interest	\$ 41,011	\$ 43,770

See accompanying notes.

Global Links

Notes to Financial Statements

December 31, 2015 and 2014

Global Links ("the Organization") is a not-for-profit, medical relief and development organization dedicated to supporting health improvement initiatives in resource-poor communities, and promoting environmental stewardship in the U.S. healthcare system.

Global Links' collaborative efforts include:

- Redirecting still-useful materials away from U.S. landfills to support public health programs in targeted communities throughout the hemisphere.
- Sharing expertise and technical knowledge with international and domestic partners.
- Educating partners, volunteers, and the community on issues of global health and environmental stewardship.

Founded in 1989, Global Links provides U.S. healthcare institutions and manufacturers with an environmentally and socially responsible alternative to the disposal of surplus medical materials, while simultaneously aiming to ensure that one hundred percent of the materials it donates are needed and can be used. Global Links is committed to collaborative, transparent engagement with the U.S. community and with international partners in the collection, preparation, and donation of humanitarian aid.

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The significant accounting policies of Global Links, all of which are in conformity with accounting principles generally accepted in the United States of America, are summarized below:

Basis of Presentation

Global Links reports amounts for its total assets, liabilities, and net assets in a statement of financial position, the change in its net assets in a statement of activities, and the change in its cash and cash equivalents in a statement of cash flows. Also, its net assets and its revenues, expenses, gains, and losses are classified in these financial statements based on the existence or absence of donor imposed restrictions, as temporarily restricted, permanently restricted, or unrestricted. Temporarily restricted net assets are those whose use by Global Links has been limited by donors to a specific time period or purpose. Global Links has no permanently restricted net assets. Unrestricted net assets are those currently available at the discretion of the Board for unlimited use in the Organization's operations.

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results may differ from those estimates.

Global Links
Notes to Financial Statements
December 31, 2015 and 2014

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Cash and Cash Equivalents

Cash and cash equivalents consist of highly liquid debt instruments purchased with an original maturity of three months or less and cash held in checking, savings, money market accounts, and certificates of deposit. At year-end and at various times during the years ended December 31, 2015 and 2014, the Organization had cash balances in excess of the federally insured limits. The deposits were held at various financial institutions.

Investments

Investments in equity securities with readily determinable fair values and all investments in debt securities are measured at fair value based on quoted market prices in the Statements of Financial Position. Dividends, interest, and other investment income or loss, including realized gains and losses and unrealized appreciation and depreciation, are reported in the period earned as increases or decreases in unrestricted net assets unless the use of the assets received is limited by donor-imposed restrictions or by law. Donor-restricted investment income would be reported as an increase in temporarily restricted net assets or, if and when applicable, permanently restricted net assets.

Accounts Receivable

Accounts receivable represent amounts committed by grantors or others that have not been received by the Organization by year-end. All amounts are due within one year. Management has determined that no allowance is necessary based on an analysis of each open account.

Contributions Receivable

Contributions receivable represent amounts committed by donors that have not been received by the Organization by year-end. Contributions to be received after one year are discounted at an appropriate rate commensurate with the risks involved. Amortization of the discount is recorded as additional contribution revenue in accordance with donor-imposed restrictions, if any, on the contributions. Management has determined that no allowance is necessary based on an analysis of each open account.

Contributions and Support

Contributions, gifts, and unconditional promises to give cash and other assets to Global Links are reported at fair value at the date received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the gift is physically received. The contributions are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the Statements of Activities as net assets released from restrictions. Contributions whose restrictions have been met in the same year are reported as unrestricted.

Donated Materials, Supplies, and Equipment

Donations include materials, supplies, and equipment donated for use in resource-poor communities. The dollar value of such donations and the related "materials and supplies shipped" expense can fluctuate significantly from year to year. Global Links reports gifts of material and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets must be used.

Global Links

Notes to Financial Statements

December 31, 2015 and 2014

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Grants

Grants generally represent monies received that are granted to cover the international and domestic medical aid program and administration expenses. Deferred revenue consists of grant funds received for specific projects that have not yet been spent. As the requisite costs are incurred, the revenue is recognized.

In-Kind Contributions

In-kind contributions represent donated professional services from unrelated parties. Contributions of services shall be recognized if the services received (a) create or enhance a non-financial asset or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Global Links receives a substantial amount of volunteered support from individuals and charitable organizations whose time is not recognized as a contribution in the financial statements since the recognition criteria under GAAP were not met (see Note 4).

Inventory

Inventory, representing donated and purchased materials awaiting shipment to partners or resource-poor communities, is stated at estimated fair market value. Due to the timing of receipts and shipments of donated materials and supplies, significant fluctuations in inventory levels may occur which will also significantly impact the change in net assets as presented in the Statements of Activities. All items included in inventory are to be used for program services and are not available for liquidation.

Property and Equipment

Buildings and furniture, fixtures, and equipment are stated at cost (or estimated fair value for donated items). Depreciation is provided on the straight-line method over an estimated useful life of forty years for buildings and five to seven years for furniture, fixtures, and equipment. Depreciation expense was \$70,511 and \$71,099 for 2015 and 2014, respectively.

Allocation of Expenses

The costs of providing the various programs and supporting activities of Global Links have been summarized on a functional basis in the Statements of Activities. Accordingly, certain costs have been allocated among the program and supporting activities benefited in a rational and systematic manner.

Income Taxes

Global Links has been determined to be an exempt organization under Section 501(c)(3) of the Internal Revenue Code and, therefore, is not subject to income tax under present laws. Accordingly, no provision for income taxes has been included.

In accordance with generally accepted accounting principles relative to uncertainty in income taxes, the Organization recognizes the income tax benefit (or liability as applicable) from an uncertain tax position when it is more likely than not that, based on technical merits, the position will be sustained upon examination, including resolutions of any related appeals or litigation process.

Subsequent Events

In preparing these financial statements, Global Links has evaluated events and transactions for potential recognition or disclosure through April 27, 2016, the date the financial statements were available to be issued.

Global Links
Notes to Financial Statements
December 31, 2015 and 2014

NOTE 2 - LINE OF CREDIT

Global Links entered a line of credit borrowing agreement with a regional bank on July 2, 2012. This line of credit provides a maximum borrowing limit of \$500,000 with interest payable monthly on any outstanding balance. The annual rate of interest is based on the one-month LIBOR rate plus 2.50 percentage points. This agreement is secured by all assets of Global Links, collateralized with an investment account maintained at the bank, and requires the maintenance of a debt service coverage ratio of at least 1.20 to 1 measured on an annual basis. The line of credit is revolving, with no expiration date.

Global Links also has a line of credit borrowing agreement with another regional bank that has a borrowing limit of \$100,000 with interest payable monthly on any outstanding balance. The annual rate of interest is based on the bank's prime rate plus 1.00 percentage point. This agreement is secured by all deposits Global Links maintains at the bank.

The outstanding balance on these lines of credit was \$0 at December 31, 2015 and 2014.

NOTE 3 - MATERIALS AND SUPPLIES CONTRIBUTED TO OTHER ORGANIZATIONS

Global Links often receives donations of large quantities of materials and supplies from donors' surplus inventories. When particular items offered are not appropriate for use in its normal endeavors, Global Links contributes these items to other charitable organizations aiding those in need in other parts of the world. This constitutes a service to both the donor and the other charities. However, because the receipt and ultimate disposition of these materials and supplies is controlled by other charities, Global Links does not include their value in revenues or expenses in the Statements of Activities.

NOTE 4 - VOLUNTEER SERVICES

There were 238 individuals who contributed a total of more than 9,300 hours of volunteer service at Global Links during 2015. Also during 2015, 102 groups volunteered a total of 249 times with a total of 1,994 participants (individuals who came more than once were counted as participants for each time they came). On average, these groups volunteered for approximately two hours each visit, thereby contributing approximately 4,000 hours of volunteer service.

Combined, Global Links received approximately 14,100 hours of volunteer service from approximately 2,200 individuals during 2015.

During 2014, there were 235 individuals who contributed a total of more than 8,100 hours of volunteer service at Global Links. Also during 2014, 83 groups volunteered a total of 206 times with a total of 1,747 participants equating to over 3,500 hours of volunteer service.

Combined, Global Links received approximately 12,600 hours of volunteer service from approximately 1,990 individuals during 2014.

Global Links

Notes to Financial Statements

December 31, 2015 and 2014

NOTE 4 - VOLUNTEER SERVICES - CONTINUED

These services have been valued by management to be approximately \$325,000 and \$283,000 for the years ended December 31, 2015 and 2014, respectively.

These services were not recognized as income as they did not meet the accounting criteria.

NOTE 5 - NET ASSETS

Temporarily restricted net assets are available for the following purposes:

	December 31	
	2015	2014
New offices and warehouse	\$ 29,156	\$ 50,794

Net assets released from donor restrictions during the years ended December 31, 2015 and 2014 were \$21,638 and \$489,113, respectively.

NOTE 6 - INVESTMENTS AND FAIR VALUE MEASUREMENTS

Investments

The carrying amounts and market values of Global Links' investments at December 31, 2015 and 2014 are as follows:

	December 31, 2015		December 31, 2014	
	Cost	Market Value	Cost	Market Value
Investments:				
Money market funds	\$ 10,683	\$ 10,683	\$ 113,072	\$ 113,072
Exchange traded funds	108,988	116,906	38,928	57,920
Bond funds	419,019	399,680	280,061	274,493
Equity funds	291,590	278,424	298,900	310,748
Loan funds	57,612	54,449	125,000	121,271
Real Estate funds	22,413	28,065	20,756	27,419
Common stock	8,685	20,246	8,685	24,566
	\$ 918,990	\$ 908,453	\$ 885,402	\$ 929,489

Global Links

Notes to Financial Statements

December 31, 2015 and 2014

NOTE 6 - INVESTMENTS AND FAIR VALUE MEASUREMENTS - CONTINUED

Investment income (loss) is comprised of the following at December 31:

	2015	2014
Unrealized appreciation (depreciation)	\$ (47,172)	\$ 2,009
Realized gain (loss)	(2,571)	(4,056)
Interest and dividends	37,950	45,577
Total	\$ (11,793)	\$ 43,530

Fair Value

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices to active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets.

Level 2: Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2015.

Common Stock	Valued at the quoted fair market value for shares held at year end.
Mutual Funds	Valued at the net asset value (NAV) for shares held at year end.
Money Market	Valued at the quoted fair market value for shares held at year end.
Donated inventory	Valued based on research of similar items on the internet with discounts if applicable

Global Links

Notes to Financial Statements

December 31, 2015 and 2014

NOTE 6 - INVESTMENTS AND FAIR VALUE MEASUREMENTS - CONTINUED

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while Global Links believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Assets at Fair Value as of December 31, 2015:

	Level 1	Level 2	Level 3	Total
Money market funds	\$ 10,683	\$ -	\$ -	\$ 10,683
Exchange traded funds	116,906			116,906
Bond funds	399,680			399,680
Equity funds	278,424	-	-	278,424
Loan funds	54,449	-	-	54,449
Real estate funds	28,065	-	-	28,065
	<u>888,207</u>	<u>-</u>	<u>-</u>	<u>888,207</u>
Common stock	20,246	-	-	20,246
Inventory	-	-	3,879,907	3,879,907
Total	\$ <u>908,453</u>	\$ <u>-</u>	\$ <u>3,879,907</u>	\$ <u>4,788,360</u>

Assets at Fair Value as of December 31, 2014:

	Level 1	Level 2	Level 3	Total
Money market funds	\$ 113,072	\$ -	\$ -	\$ 113,072
Exchange traded funds	57,920			57,920
Bond funds	274,493	-	-	274,493
Equity funds	310,748	-	-	310,748
Loan funds	121,271			121,271
Real estate funds	27,419	-	-	27,419
	<u>904,923</u>	<u>-</u>	<u>-</u>	<u>904,923</u>
Common stock	24,566	-	-	24,566
Donated inventory	-	-	3,273,042	3,273,042
Total	\$ <u>929,489</u>	\$ <u>-</u>	\$ <u>3,273,042</u>	\$ <u>4,202,531</u>

The following table presents changes in Global Links' Level 3 assets measured at fair value on a recurring basis for the years ended December 31, 2015 and 2014:

	2015	2014
Balance, beginning of year	\$ 3,273,042	\$ 3,550,315
Donated and purchased	3,597,601	2,749,605
Shipments	(2,990,736)	(3,026,878)
Balance, End of Year	\$ <u>3,879,907</u>	\$ <u>3,273,042</u>

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NOTE 7 - CONTRIBUTIONS RECEIVABLE

Contributions receivable are summarized as follows as of December 31, 2015 and 2014:

Contributions receivable expected to be collected in:	2015	2014
Less than one year	\$ 17,556	\$ 29,885
One to five years	11,600	20,909
Total	<u>\$ 29,156</u>	<u>\$ 50,794</u>

Contributions receivable are recorded as temporarily restricted net assets at December 31, 2015 and 2014.

NOTE 8 - CAPITAL CAMPAIGN

During the year ended December 31, 2013, Global Links entered into a capital campaign. The purpose of the campaign is to raise \$3,166,000 for a new building that houses both operations and warehouse facilities. As of December 31, 2015 and 2014, Global Links has raised \$2,639,638 and \$2,627,383, respectively, of which \$29,156 and \$50,794 is receivable at December 31, 2015 and 2014, respectively. The balance is deemed fully collectible by management. Cumulative building expenses include costs associated with the building that were capitalized as well as interest on the mortgage and utility and maintenance expenses. Cumulative building expenses related to the capital campaign approximated \$2,693,715 for the year ended December 31, 2015 (\$119,078 and \$156,482 for the years ended December 31, 2015 and 2014, respectively).

NOTE 9 - DEFERRED REVENUE

Global Links receives grants and contracts from private foundations and other organizations to be used for specific projects. The excess of any cash receipts over reimbursable expenses is included in deferred revenue. When expenses are incurred for the related projects, contribution and grant revenue is recognized in the Statement of Activities. For the years ended December 31, 2015 and 2014, \$247,479 and \$47,429, respectively were recognized as contribution and grant revenue.

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NOTE 10 - LONG-TERM DEBT

Long-term debt consists of the following:

	<u>December 31</u>	
	2015	2014
Mortgage note in the original amount of \$1,800,000 payable to a regional bank. The note requires 180 monthly payments of principal (\$10,000) plus interest, which is based on the one-month LIBOR plus 2.50 percentage points (2.93% and 2.67% as of December 31, 2015 and 2014, respectively). The note is secured by real estate owned by Global Links, with a net book value of \$2,288,633 and \$2,339,733 at December 31, 2015 and 2014, respectively, and has a scheduled payoff date of January 2028.	\$ 1,440,000	\$ 1,560,000
Portion payable within one year and classified as current.	<u>(120,000)</u>	<u>(120,000)</u>
Total Long-Term Debt	\$ <u>1,320,000</u>	\$ <u>1,440,000</u>

The aggregate payments required for annual periods subsequent to December 31, 2015 are as follows:

<u>Fiscal Year:</u>	<u>Principal</u>
2016	\$ 120,000
2017	120,000
2018	120,000
2019	120,000
2020	120,000
2021 - 2025	600,000
2026 - 2028	240,000
TOTAL	\$ <u>1,440,000</u>

Total interest expense was \$41,011 and \$43,770 for the years ended December 31, 2015 and 2014, respectively.

SUPPLEMENTARY INFORMATION

Global Links

Schedule of Activities by Asset Class with Comparative Totals

Year Ended December 31

Year Ended December 31							
	Unrestricted Net Assets				Total Net Assets		
	Cash and Other	Materials and Supplies	Total	Temporarily Restricted Net Assets	2015	(Summarized Financial Information)*	
						2014	2013
REVENUES							
Donated materials and supplies	\$ -	\$ 3,504,826	\$ 3,504,826	\$ -	\$ 3,504,826	\$2,672,761	\$ 3,326,076
Grants and contributions	1,055,042	-	1,055,042	-	1,055,042	1,011,154	2,863,684
Miscellaneous sales and other	95,493	-	95,493	-	95,493	92,315	72,770
Special events	27,100	-	27,100	-	27,100	10,672	(2,485)
In-kind contributions	4,254	-	4,254	-	4,254	4,862	4,202
Interest and dividends	37,950	-	37,950	-	37,950	45,577	41,642
Realized gain (loss) on investments	(2,571)	-	(2,571)	-	(2,571)	(4,056)	(1,350)
Net unrealized appreciation (depreciation) of investments	(47,172)	-	(47,172)	-	(47,172)	2,009	(9,338)
Net assets released from restriction	21,638	-	21,638	(21,638)	-	-	-
TOTAL REVENUES	1,191,734	3,504,826	4,696,560	(21,638)	4,674,922	3,835,294	6,295,201
EXPENSES							
Program services:							
Materials, supplies, and equipment shipped	-	2,990,736	2,990,736	-	2,990,736	3,026,878	2,869,101
Personnel and other operating expenses	686,272	-	686,272	-	686,272	701,054	697,650
Shipping costs	157,785	-	157,785	-	157,785	153,997	123,151
Warehouse expenses	58,998	-	58,998	-	58,998	59,718	61,714
Travel and conferences	22,729	-	22,729	-	22,729	13,296	20,775
Medical equipment refurbishment	2,858	-	2,858	-	2,858	3,217	2,450
New building	39,371	-	39,371	-	39,371	42,019	45,695
Total Program Services	968,013	2,990,736	3,958,749	-	3,958,749	4,000,179	3,820,536
Management and general	166,774	-	166,774	-	166,774	237,273	229,545
Fundraising	112,653	-	112,653	-	112,653	113,026	118,990
TOTAL EXPENSES	1,247,440	2,990,736	4,238,176	-	4,238,176	4,350,478	4,169,071
INCREASE (DECREASE) IN NET ASSETS	\$ (55,706)	\$ 514,090	\$ 458,384	\$ (21,638)	\$ 436,746	\$ (515,184)	\$ 2,126,130

*Summarized financial information - the columns are presented for 2014 and 2013 only to facilitate financial analysis.