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Form 990



Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public

Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

<b>B</b> Check if applicable <input type="checkbox"/> Address change  <input type="checkbox"/> Name change  <input type="checkbox"/> Initial return  <input type="checkbox"/> Final return/terminated  <input type="checkbox"/> Amended return  <input type="checkbox"/> Application pending	<b>C</b> Name of organization GLOBAL CLEVELAND		<b>D Employer identification number</b>  27-5245539
	Doing business as		
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	<b>E</b> Telephone number  (216) 472-3282
	200 PUBLIC SQUARE NO 150		
	City or town, state or province, country, and ZIP or foreign postal code CLEVELAND, OH 44114		<b>G</b> Gross receipts \$ 1,192,866
	<b>F</b> Name and address of principal officer DAVID FLESHLER 200 PUBLIC SQUARE NO 150 CLEVELAND, OH 44114		
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <input type="checkbox"/> (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>J Website:</b> WWW.GLOBALCLEVELAND.ORG		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
		<b>H(c)</b> Group exemption number <input type="checkbox"/>	

<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <input type="checkbox"/>	<b>L</b> Year of formation 2011	<b>M</b> State of legal domicile OH
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Part I

Summary

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities INITIATIVES ATTRACT, CONNECT, & WELCOME NEWCOMERS (IMMIGRANTS & REFUGEES) TO STIMULATE ECONOMIC GROWTH IN THE REGION																								
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td><b>3</b> Number of voting members of the governing body (Part VI, line 1a)</td><td><b>3</b></td><td>30</td></tr><tr><td><b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)</td><td><b>4</b></td><td>30</td></tr><tr><td><b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a)</td><td><b>5</b></td><td>9</td></tr><tr><td><b>6</b> Total number of volunteers (estimate if necessary)</td><td><b>6</b></td><td>270</td></tr><tr><td><b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12</td><td><b>7a</b></td><td>0</td></tr><tr><td><b>b</b> Net unrelated business taxable income from Form 990-T, line 34</td><td><b>7b</b></td><td>0</td></tr></table>	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	30	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	30	<b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a)	<b>5</b>	9	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	270	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0						
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Revenue	<table><tr><td><b>8</b> Contributions and grants (Part VIII, line 1h)</td><td><b>Prior Year</b></td><td><b>Current Year</b></td></tr><tr><td><b>9</b> Program service revenue (Part VIII, line 2g)</td><td>1,005,992</td><td>1,192,866</td></tr><tr><td><b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td><td>2,138</td><td>0</td></tr><tr><td><b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>0</td><td>0</td></tr><tr><td><b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>0</td><td>0</td></tr><tr><td></td><td>1,008,130</td><td>1,192,866</td></tr></table>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>	<b>9</b> Program service revenue (Part VIII, line 2g)	1,005,992	1,192,866	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,138	0	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0	0		1,008,130	1,192,866						
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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	<div>*****</div> <div>Signature of officer</div>	<div>2015-07-12</div> <div>Date</div>
	<div>DAVID FLESHLER BOARD CHAIR</div> <div>Type or print name and title</div>	

Paid Preparer Use Only	Print/Type preparer's name LAURIE A GATTEN CPA	Preparer's signature LAURIE A GATTEN CPA	Date	Check <input type="checkbox"/> if self-employed	PTIN P01399120
	Firm's name <input checked="" type="checkbox"/> BARNES WENDLING CPAS INC			Firm's EIN <input checked="" type="checkbox"/> 34-1463411	
	Firm's address <input checked="" type="checkbox"/> 5050 WATERFORD DRIVE  SHEFFIELD VILLAGE, OH 44035			Phone no (440) 934-3850	

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



Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
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 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II . . .</i>	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . .</i>	22		No
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? <i>If "Yes," complete Schedule J . . .</i>	23	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a . . .</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .	24b		
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? . . .	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .	24d		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . .</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I . . .</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II . . .</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III . . .</i>	27		No
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? <i>If "Yes," complete Schedule L, Part IV . . .</i>	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i>	28b		No
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? <i>If "Yes," complete Schedule L, Part IV . . .</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . .</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . .</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . .</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . .</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I . . .</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 . . .</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2 . . .</i>	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . .</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI . . .</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
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.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	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)?		No
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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	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?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
7a	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?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	<b>Section 501(c)(7) organizations.</b> Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	<b>Section 501(c)(12) organizations.</b> Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
13a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

		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		
b	Enter the number of voting members included in line 1a, above, who are independent		
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?	Yes	
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
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		No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
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	Yes	
b	Other officers or key employees of the organization		No
	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?		No
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?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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  
PAMELA M HOLMES CFO

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

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

Form **990** (2014)



## Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

<b>1b</b>	<b>Sub-Total . . . . .</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A . . . . .</b>			
<b>d</b>	<b>Total (add lines 1b and 1c) . . . . .</b>	219,204	0	39,946

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization. 1

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	5	No

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
UNCOMNTV NETWORK LLC 2472 EAST 126TH STREET CLEVELAND, OH 44120	MARKETING AND WEBSITE DEVELOPMENT	111,194

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶1

Part VIII

Statement of Revenue

Check 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	1a	Federated campaigns . . . . .	1a				
	b	Membership dues . . . . .	1b				
	c	Fundraising events . . . . .	1c				
	d	Related organizations . . . . .	1d				
	e	Government grants (contributions)	1e	850,000			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	342,866			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f . . . . .		1,192,866			
Program Service Revenue	2a		Business Code				
	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) . . . . .				
4		Income from investment of tax-exempt bond proceeds . . . . .					
5		Royalties . . . . .					
6a		Gross rents	(i) Real	(ii) Personal			
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss) . . . . .					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b		Less cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss) . . . . .					
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a				
b		Less direct expenses . . . . .	b				
c		Net income or (loss) from fundraising events . . . . .					
9a		Gross income from gaming activities See Part IV, line 19 . . . . .	a				
b		Less direct expenses . . . . .	b				
c		Net income or (loss) from gaming activities . . . . .					
10a		Gross sales of inventory, less returns and allowances . . . . .	a				
b		Less cost of goods sold . . . . .	b				
c		Net income or (loss) from sales of inventory . . . . .					
		Miscellaneous Revenue	Business Code				
11a							
b							
c							
d	All other revenue . . . . .						
e	Total. Add lines 11a-11d . . . . .						
12	Total revenue. See Instructions . . . . .		1,192,866	0	0	0	

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.				
2	Grants and other assistance to domestic individuals. See Part IV, line 22.				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	219,204	164,108	39,382	15,714
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.	207,947	200,188	7,759	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.	41,078	34,916	4,519	1,643
10	Payroll taxes.	31,030	15,823	11,405	3,802
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	1,850	1,585	198	67
c	Accounting.	25,851	11,348	13,969	534
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	262,719	225,277	28,086	9,356
12	Advertising and promotion.	85,808	85,047	571	190
13	Office expenses.	55,467	35,017	15,297	5,153
14	Information technology.	13,695	11,737	1,465	493
15	Royalties.				
16	Occupancy.	41,670	35,419	4,584	1,667
17	Travel.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	156,653	154,342	1,733	578
20	Interest.	6,888	341	6,547	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	58,658	48,585	7,787	2,286
23	Insurance.	6,287	2,902	3,259	126
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					
b					
c					
d					
e	All other expenses.				
25	<b>Total functional expenses.</b> Add lines 1 through 24e.	1,214,805	1,026,635	146,561	41,609
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check 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			94,502	1	374,612
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			1,006,261	3	631,683
	4	Accounts receivable, net				4	
	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 instructions) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			10,912	9	500
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	520,857			
	b	Less accumulated depreciation	10b	196,395	306,942	10c	324,462
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets			3,000	14	1,500
	15	Other assets See Part IV, line 11			19,470	15	13,294
	16	Total assets. Add lines 1 through 15 (must equal line 34)			1,441,087	16	1,346,051
Liabilities	17	Accounts payable and accrued expenses			38,429	17	47,812
	18	Grants payable				18	
	19	Deferred revenue				19	
	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			202,623	23	120,143
	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			241,052	26	167,955
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			193,774	27	546,413
	28	Temporarily restricted net assets			1,006,261	28	631,683
	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			1,200,035	33	1,178,096
	34	Total liabilities and net assets/fund balances			1,441,087	34	1,346,051

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	1,192,866
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	1,214,805
3	Revenue less expenses Subtract line 2 from line 1 . . . . .	3	-21,939
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	1,200,035
5	Net unrealized gains (losses) on investments . . . . .	5	
6	Donated services and use of facilities . . . . .	6	
7	Investment expenses . . . . .	7	
8	Prior period adjustments . . . . .	8	
9	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	9	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	1,178,096

Part XII Financial Statements and Reporting

Check 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		No
2b	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	Yes	
2c	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	Yes	
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? . . . . .		No
3b	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		

Additional Data

Software ID:

Software Version:

EIN: 27-5245539

Name: GLOBAL CLEVELAND

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALBERT RATNER ..... BOARD MEMBER	1 00 .....	X						0	0	0
(1) MARI GALINDO-DASILVA ..... BOARD MEMBER	1 00 .....	X						0	0	0
(2) RADHIKA REDDY ..... BOARD MEMBER	1 00 .....	X						0	0	0
(3) DAVID FLESHLER ..... CHAIRMAN	3 00 .....	X		X				0	0	0
(4) BOB ROSING ..... BOARD MEMBER	1 00 .....	X						0	0	0
(5) JUDGE DAN POLSTER ..... BOARD MEMBER	1 00 .....	X						0	0	0
(6) DANIEL WALSH JR ..... TREASURER AND VICE CHAIR	1 00 .....	X		X				0	0	0
(7) EDWARD BELL ..... BOARD MEMBER	1 00 .....	X						0	0	0
(8) DOUGLAS BUGIE ..... BOARD MEMBER	1 00 .....	X						0	0	0
(9) ROBERT BRIGGS ..... BOARD MEMBER	1 00 .....	X						0	0	0
(10) MARGARET WONG ..... BOARD MEMBER	1 00 .....	X						0	0	0
(11) OREN BARATZ ..... SECRETARY	1 00 .....	X		X				0	0	0
(12) JOSEPH CABRAL ..... BOARD MEMBER	1 00 .....	X						0	0	0
(13) WILLIAM GARY ..... BOARD MEMBER	1 00 .....	X						0	0	0
(14) FRED GEIS ..... BOARD MEMBER	1 00 .....	X						0	0	0
(15) THOMAS TOMASULA JR ..... BOARD MEMBER	1 00 .....	X						0	0	0
(16) THOMAS WALTERMIRE ..... BOARD MEMBER	1 00 .....	X						0	0	0
(17) VALARIE MCCALL ..... BOARD MEMBER	1 00 .....	X						0	0	0
(18) TOM ADLER ..... BOARD MEMBER	1 00 .....	X						0	0	0
(19) RONALD B RICHARD ..... BOARD MEMBER	1 00 .....	X						0	0	0
(20) GARY HANSON ..... BOARD MEMBER	1 00 .....	X						0	0	0
(21) CAROLYN BULLER ..... BOARD MEMBER	1 00 .....	X						0	0	0
(22) CHARLES CHAIKIN ..... BOARD MEMBER	1 00 .....	X						0	0	0
(23) SAM MCNULTY ..... BOARD MEMBER	1 00 .....	X						0	0	0
(24) MARSHA MOCKABEE ..... BOARD MEMBER	1 00 .....	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) NEIL MOHNEY ..... BOARD MEMBER	1 00 .....	X						0	0	0
(1) BAIJU SHAH ..... BOARD MEMBER	3 00 .....	X						0	0	0
(2) NORMAN STEINER ..... BOARD MEMBER	1 00 .....	X						0	0	0
(3) CATHERINE WURTS ..... BOARD MEMBER	1 00 .....	X						0	0	0
(4) SHEILA WRIGHT ..... BOARD MEMBER	1 00 .....	X						0	0	0
(5) JOY ROLLER ..... PRESIDENT	60 00 .....			X				149,602	0	23,211
(6) PAMELA HOLMES ..... CFO	40 00 .....			X				69,602	0	16,735

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization GLOBAL CLEVELAND	Employer identification number 27-5245539
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Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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 )

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 or IRC section (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						



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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")		1,900,927	336,680	1,005,992	1,192,866	4,436,465
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	<b>Total.</b> Add lines 1 through 3		1,900,927	336,680	1,005,992	1,192,866	4,436,465
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)						22,412
6	<b>Public support.</b> Subtract line 5 from line 4						4,414,053

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4		1,900,927	336,680	1,005,992	1,192,866	4,436,465
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 )			3,258			3,258
11	<b>Total support</b> Add lines 7 through 10						4,439,723
12	Gross receipts from related activities, etc (see instructions)					12	
13	<b>First five years.</b> 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 <b>stop here</b>						<input checked="" type="checkbox"/>

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14
15	Public support percentage for 2013 Schedule A, Part II, line 14	15
16a	<b>33 1/3% support test—2014.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	<b>33 1/3% support test—2013.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>
17a	<b>10%-facts-and-circumstances test—2014.</b> 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 <b>stop here.</b> 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	<b>10%-facts-and-circumstances test—2013.</b> 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 <b>stop here.</b> 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	<b>Private foundation.</b> 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 IIISupport 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 2014 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2013 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2014. 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—2013. 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 on line 11 of 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	3a	
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 <b>Part VI</b> when and how the organization made the determination.	3b	
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 <b>Part VI</b> what controls the organization put in place to ensure such use.	3c	
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.	4a	
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.	4b	
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.	4c	
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).	5a	
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
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 II of Schedule L (Form 990).	8	
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 <b>Part VI</b> .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b	
c Did a disqualified person (as defined in line 9(a)) 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 <b>Part VI</b> .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
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).	10b	
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	

Part IV

Supporting Organizations (continued)

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 <b>Part VI</b> 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.		
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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		

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 <b>line 2</b> below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> <b>Answer (a) and (b) below.</b>			
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 <b>Part VI identify those supported organizations and explain</b> 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.			
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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 <u>Parent of Supported Organizations</u> <b>Answer (a) and (b) below.</b>			
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.			
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.			

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	<b>Adjusted Net Income</b> (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)	1	
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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> 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)		

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 2014 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-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009. . . . .			
b From 2010. . . . .			
c From 2011. . . . .			
d From 2012. . . . .			
e From 2013. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010. . . . .			
b From 2011. . . . .			
c From 2012. . . . .			
d From 2013. . . . .			
e From 2014. . . . .			

**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).

**Facts And Circumstances Test**

Return Reference

Explanation

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

► Complete if the organization answered "Yes," to 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](http://www.irs.gov/form990).

Name of the organization GLOBAL CLEVELAND	Employer identification number 27-5245539
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Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ 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 Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, 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" to 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 in 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 in Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2014



**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" to 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

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	
- 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 in Part XIII 

☐

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

- |  | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|--|-----------------|---------------|---------------------|---------------------|--------------------|
| 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 . . . . .                            |                 |               |                     |                     |                    |
- 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 in 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" to 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' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .		249,672	124,863	124,809
d Equipment . . . . .		210,044	50,355	159,689
e Other . . . . .		61,141	21,177	39,964
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				324,462



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	1,230,523
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	37,657
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	37,657
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	1,192,866
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	1,192,866

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	1,252,462
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	37,657
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	37,657
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	1,214,805
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	1,214,805

**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.

Return Reference	Explanation
PART X, LINE 2	THE ORGANIZATION WAS INCORPORATED AS A 501(C)3 IN 2011 AND IS NOT SUBJECT TO TAX EXAMINATIONS FOR YEARS BEFORE 2011 BY TAXING AUTHORITIES IN JURISDICTIONS WHERE THE ORGANIZATION HAS FILED RETURNS. THE ORGANIZATION EVALUATES AT EACH BALANCE SHEET DATE UNCERTAIN TAX POSITIONS TAKEN, IF ANY, TO DETERMINE THE NEED TO RECORD LIABILITIES FOR TAXES, PENALTIES, AND INTEREST. THE ORGANIZATION'S POLICY IS TO RECORD INTEREST AND PENALTIES ON UNCERTAIN TAX PROVISIONS AS INCOME TAX EXPENSE. AS OF DECEMBER 31, 2014 AND 2013, THE ORGANIZATION HAD NO ACCRUED TAXES, INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS. THE ORGANIZATION ESTIMATES THE UNRECOGNIZED TAX BENEFIT WILL NOT CHANGE SIGNIFICANTLY WITHIN THE NEXT TWELVE MONTHS.

[illegible]

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.  
▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
GLOBAL CLEVELAND

Employer identification number  
27-5245539

Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III.	5b		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III.	6b		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JOY ROLLER, PRESIDENT	(i)	149,602	0	0	0	23,211	172,813	0
	(ii)	..... 0	..... 0	..... 0	..... 0	..... 0	..... 0	..... 0

**Part III**   **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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Schedule L  
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2014

Open to Public Inspection

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ▶ Attach to Form 990 or Form 990-EZ.

▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization  
GLOBAL CLEVELAND

Employer identification number  
27-5245539

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b				
1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?
				YesNo

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27.				
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance



Part IVBusiness Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ROBERT FALLS	BOARD MEMBER		ROBERT FALLS, GLOBAL CLEVELAND DIRECTOR, CEO OF FALLS COMMUNICATIONS, GLOBAL CLEVELAND PURCHASES PUBLIC RELATIONS SERVICES FROM THIS ORGANIZATION		No
(2) DANIEL P WALSH	BOARD MEMBER		DANIEL P WALSH, JR , GLOBAL CLEVELAND DIRECTOR, IS PRESIDENT, THE HUNTINGTON NATIONAL BANK - GREATER CLEVELAND REGION, WITH WHICH GLOBAL CLEVELAND HAS BANKING AND BROKERAGE ACCOUNTS AS WELL AS A LINE OF CREDIT		No
(3) SHANA MARBURY	BOARD MEMBER		SHANA MARBURY, GLOBAL CLEVELAND DIRECTOR, GENERAL COUNCIL OF GREATER CLEVELAND PARTNERSHIP (GCP) GCP'S AFFILIATE, CLEVELAND DEVELOPMENT ADVISORS IS THE "LENDER" FOR GLOBAL CLEVELAND'S OPERATING/CONSTRUCTION LOAN		No
(4) NORMAN STEINER	BOARD MEMBER		NORMAN STEINER, GLOBAL CLEVELAND DIRECTOR, IS VICE PRESIDENT OF BUSINESS DEVELOPMENT FOR MEDICAL MUTUAL OF OHIO, THE ENTITY FROM WHICH GLOBAL CLEVELAND PURCHASES ITS MEDICAL COVERAGE		No

Part VSupplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
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**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](http://www.irs.gov/form990).**

OMB No 1545-0047

**2014****Open to Public  
Inspection**Name of the organization  
GLOBAL CLEVELAND**Employer identification number**

27-5245539

**Return  
Reference****Explanation**FORM 990,  
PART III,  
LINE 2

IN 2014, GLOBAL CLEVELAND COMPLETED A STRATEGIC PLANNING PROCESS THAT HELPED TO BRING GREATER CLARITY AND FOCUS TO THE ORGANIZATION'S MISSION AND GOALS APPROVED BY THE GLOBAL CLEVELAND BOARD IN MAY 2014, GLOBAL CLEVELAND'S NEW STRATEGIC PLAN INCORPORATES ATTRACTION, CONNECTION AND WELCOMING STRATEGIES THAT ARE DESIGNED TO INCREASE THE FLOW OF POPULATION AND STIMULATE ECONOMIC GROWTH IN THE REGION DURING THE FISCAL YEAR GLOBAL CLEVELAND'S WORK WAS FOCUSED ON FOUR MAIN OBJECTIVES I TO CONNECT AND CONVENE GREATER CLEVELAND BUSINESSES, COLLEGES, UNIVERSITIES, AND MULTICULTURAL ORGANIZATIONS TO ATTRACT NEWCOMERS, BOTH FOREIGN AND DOMESTIC, THAT WILL SUPPORT THE GROWTH AND TALENT NEEDS OF THE REGION'S BUSINESSES, INDUSTRIES, AND COMMUNITIES II TO ASSIST NEWCOMERS IN THEIR EFFORTS TO ESTABLISH ROOTS IN NEIGHBORHOODS ACROSS THE CLEVELAND MSA AND TO CONNECT STUDENTS TO AREA EMPLOYERS TO PREPARE THEM FOR JOBS IN THE REGION AND INSTILL IN THEM A SENSE OF PRIDE AND SUPPORT FOR THEIR EDUCATIONAL INSTITUTION III TO WORK WITH ALL SEGMENTS OF THE COMMUNITY TO CREATE A WELCOMING REGION THAT IS A PLACE OF OPPORTUNITY FOR ALL PEOPLE AND AN EMPLOYMENT CULTURE BASED ON MERIT AND OPENNESS, REGARDLESS OF AGE OR LONGEVITY IN CLEVELAND IV TO CREATE A BEST PRACTICE MODEL FOR TALENT ATTRACTION FOR THE STATE OF OHIO THAT CAN BE REPLICATED IN OTHER REGIONS OF THE STATE

Return Reference	Explanation	
	PART III, LINE 2	<p>THIS MESSAGE WAS ECHOED BY ENTREPRENEURS, BUSINESS AND COMMUNITY LEADERS INCLUDING SHANNON LYONS, DIRECTOR OF LAUNCHHOUSE ACCELERATOR PROGRAM, JACK SCHRON, JR CUYAHOGA COUNTY COUNCIL REPRESENTATIVE AND CHIEF EXECUTIVE OFFICER OF JERGENS INC , LES CRUME, DIRECTOR OF SALES FOR JOBSOHIO, AND BAIJU SHAH, GLOBAL CLEVELAND BOARD CHAIRMAN AND THE CHIEF EXECUTIVE OFFICER OF BIOMOTIV, LLC, A HEALTHCARE START-UP</p> <p>3)OF THE 137 EVENT SURVEYS COMPLETED BY YOUNG PROFESSIONALS, 118 RESPONDED "YES" WHEN ASKED, "ARE YOU OPEN TO MOVING TO CLEVELAND?"</p> <p>D NEW TALENT-EMPLOYER CONNECTIONS DURING THE FISCAL YEAR, GLOBAL CLEVELAND FOCUSED ITS EFFORTS ON ATTRACTING AND CONNECTING HIGH-SKILLED TALENT TO FILL OPEN JOBS FOR AREA EMPLOYERS , PARTICULARLY POSITIONS IN STEM-RELATED (I.E SCIENCE, TECHNOLOGY, ENGINEERING AND MATHEMATICS) INDUSTRY SECTORS, WHERE NORTHEAST OHIO BUSINESSES ARE FACED WITH A SHORTAGE OF SKILLED EMPLOYEES</p> <p>FOLLOWING THIS STRATEGY</p> <p>1) OVER 1,300 JOB SEEKERS CONNECTED TO CLEVELAND AREA JOBS THROUGH GLOBAL CLEVELAND'S ONLINE JOB FAIRS, RESOURCES, AND EVENTS</p> <p>2) GLOBAL CLEVELAND'S JOB FAIR FOR IT PROFESSIONALS HELD DURING NORTHEAST OHIO SOFTWARE ASSOCIATION (NEOSA) TECH WEEK, ATTRACTED 315 JOBSEEKERS FROM 16 STATES AND ONE FOREIGN COUNTRY</p> <p>TWENTY-TWO COMPANIES PARTICIPATED IN THIS VIRTUAL JOB FAIR, POSTING A COMBINED 77 POSITIONS</p> <p>3) GLOBAL CLEVELAND'S VIRTUAL JOB FAIR, HELD IN CONJUNCTION WITH THE NATIONAL LAUNCH OF GLOBAL CLEVELAND'S TALENT ATTRACTION INITIATIVE ATTRACTED 403 JOBSEEKERS, PROMOTED 213 JOB OPENINGS AT 26 AREA COMPANIES, GLOBAL CLEVELAND'S OUTREACH EFFORTS DREW A GLOBAL TALENT POOL THAT ATTRACTED 150 NEW APPLICATIONS PER COMPANY</p> <p>4) "GLOBAL CLEVELAND TALENT CONNECTION", GLOBAL CLEVELAND'S MEMBERS-ONLY LINKEDIN GROUP, WHICH CONNECTS EMPLOYERS AND JOBSEEKERS, ADDED 637 NEW MEMBERS AND BROADCASTED, ON AVERAGE, 911 JOB POSTINGS PER MONTH</p> <p>II TO ASSIST NEWCOMERS IN THEIR EFFORTS TO ESTABLISH ROOTS IN NEIGHBORHOODS ACROSS THE CLEVELAND MSA AND TO CONNECT STUDENTS TO AREA EMPLOYERS TO PREPARE THEM FOR JOBS IN THE REGION AND INSTILL IN THEM A SENSE OF PRIDE AND SUPPORT FOR THEIR EDUCATIONAL INSTITUTION</p> <p>DURING THE FISCAL YEAR, GLOBAL CLEVELAND WORKED WITH AREA EMPLOYERS, EDUCATIONAL INSTITUTIONS AND COMMUNITY ORGANIZATIONS TO CONNECT COLLEGE AND GRADUATE STUDENTS, PARTICULARLY FOREIGN-BORN STUDENTS, TO INTERNSHIPS, CO-OPS, AND FELLOWSHIPS AND YOUNG PROFESSIONALS TO JOBS AND BUSINESS OPPORTUNITIES</p> <p>GLOBAL CLEVELAND'S EFFORTS TO ENGAGE STUDENTS AND YOUNG PROFESSIONALS, AND SUPPORT THE COMMUNITY'S DESIRE TO RETAIN YOUNG HIGH-SKILLED TALENT IN THE REGION BROUGHT THE FOLLOWING RESULTS</p> <p>A STUDENT CONNECTIONS</p> <p>1)890 STUDENTS ATTENDED WORKSHOPS, EVENTS, OR PROGRAMS HOSTED BY GLOBAL CLEVELAND</p> <p>2)# CHOOSE CLE, GLOBAL CLEVELAND'S NETWORKING EVENT FOR SUMMER INTERNS, CONNECTED 290 CLEVELAND-AREA COLLEGE AND GRADUATE-LEVEL SUMMER INTERNS AFFILIATED WITH PROGRAMS SPONSORED BY</p> <p>SUMMER ON THE CUYAHOGA, CLEVELAND LEADERSHIP CENTER, (I) CLEVELAND, HILLEL, THE CLEVELAND FOUNDATION FELLOWSHIP PROGRAM, AND NOCHE WITH REPRESENTATIVES FROM 44 AREA COMPANIES</p> <p>THIS EVENT PROVIDED A FUN, RELAXING VENUE FOR STUDENTS TO EXPLORE FUTURE INTERNSHIPS AND/OR EMPLOYMENT POSSIBILITIES AND A "SCOUTING" OPPORTUNITY TO HELP EMPLOYERS IDENTIFY AND RECRUIT TOP TALENT</p> <p>3)170 INTERNATIONAL STUDENTS AT CLEVELAND STATE UNIVERSITY AND 415 INTERNATIONAL STUDENTS AT CASE WESTERN RESERVE UNIVERSITY ATTENDED GLOBAL CLEVELAND-SPONSORED NETWORKING AND JOB SEARCH WORKSHOPS HELD AT THEIR RESPECTIVE INSTITUTIONS</p> <p>4)66 EMPLOYERS ENGAGED IN PROGRAMS RELATED TO INTERNATIONAL HIRING AND CONNECTING TALENT TO THE REGION</p> <p>5)92 YOUNG PROFESSIONALS ATTENDED THE 3RD ANNUAL HOME SWEET CLEVELAND NETWORKING RECEPTION HOSTED BY GLOBAL CLEVELAND AND CLEVELAND LEADERSHIP CENTER DESIGNED TO CONNECT PROSPECTIVE "BOOMERANGS," WHO WERE HOME FOR THE HOLIDAYS, WITH AREA BUSINESS LEADERS WHO ARE INTERESTED IN ATTRACTING TOP TALENT AND WILL USE THEIR NETWORK TO CONNECT THEM TO A JOB</p> <p>B DIVERSITY TRAINING FOR EMPLOYERS</p> <p>GLOBAL CLEVELAND, IN PARTNERSHIP WITH THE DIVERSITY CENTER OF NORTHEAST OHIO, CONDUCTED A SERIES OF FIVE WORKSHOPS FOR AREA EMPLOYERS DURING THE YEAR</p> <p>1)91 EMPLOYEES FROM 53 UNIQUE COMPANIES ATTENDED DIVERSITY WORKSHOPS THAT WERE TWO TO FOUR HOURS IN LENGTH AND COVERED A RANGE OF TOPICS INCLUDING CULTURAL DIVERSITY 101, UNDERSTANDING UNCONSCIOUS BIAS, SUCCESSFUL DIVERSE TALENT RETENTION, BUSINESS CASE FOR DIVERSITY, AND INCLUSION AND INTERCULTURAL COMMUNICATION</p> <p>2)GLOBAL CLEVELAND WAS AWARDED A TWO-YEAR CONTRACT BY JUMPSTART TO INCREASE THE DIVERSITY OF MENTORS, ADVISORS, AND JOBSEEKERS FOR THIRD FRONTIER FUNDED ENTREPRENEURIAL COMPANIES</p> <p>3)GLOBAL CLEVELAND IS CURRENTLY WORKING WITH GREATER CLEVELAND PARTNERSHIP AND EMPLOYER RESOURCE COUNCIL (ERC) TO DEVELOP A "GLOBAL EMPLOYER RECOGNITION PROGRAM" THAT WILL RECOGNIZE AND CELEBRATE BEST-IN-CLASS COMPANIES THAT HIRE INTERNATIONAL STUDENTS AND EMPLOYEES AND PROMOTE EMPLOYMENT PRACTICES THAT DEMONSTRATE CULTURAL DIVERSITY</p>

Return Reference	Explanation	
	PART III, LINE 2	TY AND INCLUSION

Return Reference	Explanation	
	PART III, LINE 2	<p>III TO WORK WITH ALL SEGMENTS OF THE COMMUNITY TO CREATE A WELCOMING REGION THAT IS A PLACE OF OPPORTUNITY FOR ALL PEOPLE AND AN EMPLOYMENT CULTURE BASED ON MERIT AND OPENNESS, REGARDLESS OF AGE OR LONGEVITY IN CLEVELAND DURING THE FISCAL YEAR, GLOBAL CLEVELAND ENGAGED OVER 455 BUSINESS AND COMMUNITY PARTNERS IN INITIATIVES DESIGNED TO PROMOTE DIALOGUE, COMMUNITY ENGAGEMENT, AND EQUAL OPPORTUNITY FOR NEWCOMERS AND RESIDENTS OF ALL BACKGROUNDS THESE EFFORTS INCLUDED A COMMUNITY CONVERSATIONS GLOBAL CLEVELAND, IN PARTNERSHIP WITH THE CITY OF CLEVELAND COMMUNITY RELATIONS BOARD AND CITY COUNCIL, CONDUCTED NINE COMMUNITY CONVERSATIONS DESIGNED TO ENGAGE COMMUNITY LEADERS AND RESIDENTS IN A DIALOGUE ABOUT "HOW CAN CLEVELAND BE A MORE WELCOMING CITY?" A TOTAL OF THREE HUNDRED AND FIFTY-EIGHT CLEVELAND RESIDENTS PARTICIPATED IN THE COMMUNITY CONVERSATIONS, WHICH INCLUDED FOUR MEETINGS TO ENGAGE AREA FAITH LEADERS AND LEADERSHIP FROM CLEVELAND'S AFRICAN-AMERICAN, ASIAN, AND HISPANIC COMMUNITIES AND FIVE NEIGHBORHOOD TOWN HALL MEETINGS FOR RESIDENTS WITHIN EACH OF THE CITY'S FIVE POLICE DISTRICTS A FINAL REPORT WAS PREPARED FOR THE GLOBAL CLEVELAND BOARD OF DIRECTORS, AND SHARED WITH THE CITY OF CLEVELAND, WHICH IDENTIFIED THE CENTRAL THEMES AND OFFERED RECOMMENDATIONS TO HELP STRENGTHEN THE CITY'S RESIDENT ENGAGEMENT AND COMMUNITY WELCOMING EFFORTS B WELCOME HUBS WITH A STAFF OF NINE PROFESSIONALS AND THREE PART-TIME CONSULTANTS, THE GLOBAL CLEVELAND WELCOME HUB AT 200 PUBLIC SQUARE CONTINUED TO PROVIDE WELCOMING SERVICES TO WALK-IN TRAFFIC AND NEWCOMERS WHILE ALSO SERVING AS THE HUB FOR GLOBAL CLEVELAND'S PROGRAMMING, OPERATIONS, AND TRAINING EFFORTS GLOBAL CLEVELAND LAUNCHED ITS FIRST NEIGHBORHOOD-BASED WELCOME HUB IN THE NOBLE NEIGHBORHOOD LIBRARY IN CLEVELAND HEIGHTS THROUGH A PILOT COLLABORATION WITH THE CITY OF CLEVELAND HEIGHTS, THE CLEVELAND HEIGHTS -UNIVERSITY HEIGHTS CITY SCHOOL DISTRICT, THE HEIGHTS LIBRARIES AND US TOGETHER THE WELCOME HUB IS LOCATED IN CLOSE PROXIMITY TO A LARGE BHUTANESE IMMIGRANT POPULATION GLOBAL CLEVELAND-TRAINED VOLUNTEERS STAFF THE WELCOME HUB ON TUESDAY EVENINGS FROM 6 00 P M - 8 00 P M SINCE THE HUB'S OPENING IN SEPTEMBER 2014, GLOBAL CLEVELAND VOLUNTEERS HAVE HELPED NINETEEN REFUGEES AND THEIR FAMILIES ACCESS A WIDE RANGE OF COMMUNITY RESOURCES, INCLUDING JOB SEARCH, ENGLISH LANGUAGE LESSONS AND COACHING SERVICES GLOBAL CLEVELAND IS CURRENTLY IN DISCUSSIONS WITH THE CUYAHOGA COUNTY LIBRARY SYSTEM AND THE CLEVELAND PUBLIC LIBRARY ABOUT ADDING OTHER NEIGHBORHOOD-BASED WELCOME HUBS IN COMMUNITIES WHERE THERE ARE LARGE CONCENTRATIONS OF REFUGEES AND IMMIGRANTS REPRESENTATIVES FROM THE METROHEALTH SYSTEM, HISPANIC CHAMBER OF COMMERCE AND THE HISPANIC ALLIANCE ALSO MET WITH GLOBAL CLEVELAND TO DISCUSS THE FEASIBILITY OF CREATING A WELCOME HUB ON THE NEAR WEST SIDE TO SERVE CLEVELAND'S LARGE HISPANIC COMMUNITY C GLOBAL CLEVELAND'S WELCOMING PROGRAMS GLOBAL CLEVELAND'S WELCOMING PROGRAM COLLABORATED WITH A NUMBER OF COMMUNITY-BASED ORGANIZATIONS TO ESTABLISH EFFECTIVE STRATEGIES TO ENGAGE AND SUPPORT CLEVELAND'S DIVERSE POPULATIONS, INCLUDING ITS ONE HUNDRED AND SEVENTEEN ETHNIC COMMUNITIES THREE HUNDRED AND FIFTY-NINE INTERNATIONAL NEWCOMERS WERE MATCHED WITH VOLUNTEERS TO RECEIVE CAREER AND EMPLOYMENT GUIDANCE, LANGUAGE PRACTICE, TRANSLATIONS AND ASSISTANCE IN NAVIGATING THEIR NEW HOME THROUGH THIS INITIATIVE GLOBAL CLEVELAND PARTNERED WITH 1) THE CLEVELAND CULTURAL GARDENS AND THE ONE WORLD FESTIVAL TO SUPPORT CLEVELAND'S ONE WORLD DAY CELEBRATION, 2) CLEVELAND'S LGBT COMMUNITY TO SUPPORT THE 2014 GAY GAMES, AND 3) THE REFUGEE SERVICES COLLABORATIVE TO SUPPORT REFUGEE AND IMMIGRANT-OWNED RESTAURANTS DURING WELCOMING WEEK D AFRICAN-AMERICAN INITIATIVE THE INITIATIVE WAS CREATED TO ADDRESS ISSUES RELATED TO ATTRACTING AND RETAINING AFRICAN-AMERICAN TALENT ITS WORK HAS IDENTIFIED THREE MAIN AREAS OF CONCERN 1) INCREASING THE NUMBER OF AFRICAN-AMERICANS SERVING ON BOARDS AND COMMISSIONS, 2) CLOSING THE SKILLS GAP, AND, 3) BECOMING A WELCOMING CITY RECOMMENDATIONS FROM THIS GROUP WILL BE REFERRED TO GLOBAL CLEVELAND'S NEW POLICY COMMITTEE TO BE TURNED INTO ACTION ITEMS FOR THE BOARD E ASIAN INITIATIVE GLOBAL CLEVELAND STAFF COLLABORATED WITH CHIA-MIN CHEN, LIAISON TO THE ASIAN COMMUNITY FOR THE CITY OF CLEVELAND, TO CONVENE MONTHLY MEETINGS WITH ASIAN COMMUNITY LEADERS AND, PARTNERED WITH 1) GLOBAL CLEVELAND BOARD MEMBER AND NATIONALLY RENOWNED IMMIGRATION ATTORNEY MARGARET W WONG TO HOST NINETY-SEVEN INDIVIDUALS REPRESENTING CLEVELAND'S DIVERSE ASIAN COMMUNITY 2) ASIA INC FOR THE ANNUAL CLEVELAND ASIAN FESTIVAL TO SURVEY THE NEEDS OF THE ASIAN COMMUNITY, DURING THE FESTIVAL, ONE HUNDRED AND THIRTY-FOUR ATTENDEES SIGNED-UP TO BE GLOBAL CLEVELAND VOLUNTEERS 3) MOTIVASIANS AND THE OHIO CHINESE ASSOCIATION (OCA) TO SUPPORT EFFORTS TO WELCOME AND ENGAGE INTERNATIONAL STUDENTS AT CASE WESTERN RESERVE UNIVERSITY 4) CLEVELAND MUSEUM OF NATURAL HISTORY TO SUPPO</p>

Return Reference	Explanation	
	PART III, LINE 2	RT ITS SILK ROAD EXHIBITION F HISPANIC INITIATIVE GLOBAL CLEVELAND CONTINUED TO MEET WIT H LEADERS OF CLEVELAND'S DIVERSE SPANISH-SPEAKING COMMUNITIES TO SUPPORT THEIR EFFORTS TO CONNECT RESIDENTS, INCLUDING RECENT IMMIGRANTS, TO GREATER CLEVELAND'S JOBS, SERVICES AND RESOURCES THIS WORK INCLUDED 1) SPONSORING YO SOY LATINO CLEVELAND, NORTHEAST OHIO'S FIR ST, LOCAL TELEVISION PROGRAM ON WKYC-TV THAT REACHES OVER 22,000 HOUSEHOLDS EACH WEEK 2) ENLISTING COLLECTION AUTO GROUP PRESIDENT BERNIE MORENO TO CONVENE A DISCUSSION WITH LEADE RS OF CLEVELAND'S DIVERSE LATINO COMMUNITIES ON THE BARRIERS TO ECONOMIC PROSPERITY AND IN CLUSION FOR MEMBERS OF CLEVELAND'S HISPANIC COMMUNITY 3) PARTNERING WITH THE YOUNG LATINO NETWORK TO SUPPORT EFFORTS TO WELCOME AND ENGAGE INTERNATIONAL STUDENTS AT CASE WESTERN R ESERVE UNIVERSITY

Return Reference	Explanation	
	PART III, LINE 2	<p>IV TO CREATE A BEST PRACTICE MODEL FOR TALENT ATTRACTION FOR THE STATE OF OHIO THAT CAN BE REPLICATED IN OTHER REGIONS OF THE STATE. GLOBAL CLEVELAND CONTINUED TO ESTABLISH STRATEGIC PARTNERSHIPS, SEEK OUT BEST PRACTICES, AND ENGAGE THOUGHT LEADERS IN AN EFFORT TO STRENGTHEN AND, WHERE NECESSARY, REALIGN GLOBAL CLEVELAND'S PROGRAMMING IN ORDER TO LEVERAGE OPPORTUNITIES AND BUILD ON OUR SUCCESSES. A. THE CENTER FOR POPULATION DYNAMICS AT CLEVELAND STATE UNIVERSITY. THE CENTER FOR POPULATION DYNAMICS AT CLEVELAND STATE UNIVERSITY WAS CREATED, IN LARGE PART, BY GLOBAL CLEVELAND BOARD LEADERSHIP TO SUPPLY RESEARCH AND DATA TO GLOBAL CLEVELAND AND OTHER CIVIC AND ECONOMIC DEVELOPMENT ORGANIZATIONS. SINCE ITS FOUNDING, IN 2013, THE WORK OF THE CENTER'S SENIOR RESEARCH ASSOCIATE AND DIRECTOR, RICHEY PIIPARINEN, HAS HAD A PROFOUND IMPACT ON GLOBAL CLEVELAND, ESPECIALLY WITH REGARD TO ITS ABILITY TO TRACK THE FLOW OF POPULATION IN AND OUT OF THE REGION. IN NOVEMBER 2014, PIIPARINEN SHARED NEW RESEARCH INDICATING THE IMPACT OF CLEVELAND'S POPULATION LOSS IS NOT ALL NEGATIVE. NEW DATA SHOWS THAT THERE HAS BEEN A MAJOR SHIFT IN CLEVELAND'S DEMOGRAPHICS. INDIVIDUALS WITH HIGHER SKILLS AND HIGHER SALARIES HAVE MOVED TO CLEVELAND, REPLACING INDIVIDUALS WITH LOWER SKILLS AND LOWER SALARIES WHO ARE LEAVING THE CITY. THE NET IMPACT OF THIS SHIFT HAS INCREASED CLEVELAND'S PER CAPITA INCOME, WHICH IS BOOSTING THE CITY'S ECONOMY. AS NEW DATA BECOMES AVAILABLE, GLOBAL CLEVELAND'S STAFF AND BOARD OF DIRECTORS HAVE THE OPPORTUNITY TO GAIN A GREATER UNDERSTANDING OF THE COMPLEXITIES OF CLEVELAND'S POPULATION DYNAMICS. 1) POPULATION ATTRACTION IS A MACRO ISSUE, 2) NO ONE SINGLE ENTITY, INCLUDING GLOBAL CLEVELAND, CAN INFLUENCE THE DECISIONS OF LARGE NUMBERS OF PEOPLE TO MOVE TO THE CITY OF CLEVELAND, 3) THERE IS A DIRECT CORRELATION BETWEEN THE LEVEL OF EDUCATIONAL ATTAINMENT AND ECONOMIC PROSPERITY, 4) POPULATIONS GROW WHEN THERE ARE MORE BIRTHS THAN DEATHS, OR, WHEN THERE IS GREATER IN-MIGRATION THAN OUT-MIGRATION, 4) CLEVELAND DOES A BETTER JOB OF RETAINING TALENT THAN OTHER CITIES BUT DOES NOT ATTRACT TALENT AS WELL AS OTHERS, AND 5) IN-MIGRATION + ENGAGEMENT = NETWORKS. NETWORKS LEAD TO INCREASED POPULATION. THROUGH GLOBAL CLEVELAND'S STRATEGIC PARTNERSHIP WITH THE CENTER FOR POPULATION DYNAMICS, THE ORGANIZATION HAS ACCESS TO CURRENT DATA AND ANALYSIS, BOTH OF WHICH ARE ESSENTIAL TO UNDERSTANDING THE REAL-TIME INDICATORS THAT ARE DRIVING POPULATION CHANGE. GLOBAL CLEVELAND WILL CONTINUE TO USE THIS DATA TO REFINE ITS STRATEGIES AND PROGRAMS TO SUPPORT ECONOMIC GROWTH. B. OHIO WELCOMING INITIATIVES TO SHARE BEST PRACTICES RELATED TO IMMIGRANT INTEGRATION. GLOBAL CLEVELAND COORDINATED A NETWORK OF THE WELCOMING INITIATIVES IN FIVE OTHER OHIO CITIES: CINCINNATI, SPRINGFIELD, DAYTON, COLUMBUS AND TOLEDO. THE "OHIO WELCOMING INITIATIVES" AGENDA INCLUDES SHARING BEST PRACTICES ON RETENTION OF INTERNATIONAL STUDENTS, ACCESS TO CAPITAL FOR IMMIGRANTS AND REFUGEES, CAREER LICENSING PATHWAYS AND THE PRESIDENT'S EXECUTIVE ACTION ON IMMIGRATION REFORM. C. MIDWEST METROS COLLABORATION - WE GLOBAL NETWORK. GLOBAL CLEVELAND RECEIVED FUNDING FROM THE WE GLOBAL NETWORK (FORMERLY KNOWN AS THE GLOBAL GREAT LAKES NETWORK) FOR ITS LEADERSHIP TO VISIT ST. LOUIS TO STUDY HOW THEIR REGIONAL ECONOMIC, CIVIC AND PHILANTHROPIC LEADERS APPROACH ISSUES RELATED TO TALENT ATTRACTION AND IMMIGRATION. D. BUILDING A SUSTAINABLE ORGANIZATION DURING THE YEAR. GLOBAL CLEVELAND'S GOVERNANCE AND ADMINISTRATIVE FUNCTIONS CONTINUED TO EVOLVE. 1) FOLLOWING BAIJU SHAH'S THREE-YEAR TERM, DAVID FLESHLER, ASSOCIATE PROVOST OF INTERNATIONAL AFFAIRS AT CASE WESTERN RESERVE UNIVERSITY, ASSUMED THE POSITION OF CHAIRMAN OF THE BOARD OF GLOBAL CLEVELAND. 2) TO STRENGTHEN GLOBAL CLEVELAND'S RELATIONSHIPS WITH KEY STRATEGIC PARTNERS, THE BOARD APPROVED THE ADDITION TWO NEW ADVISORY BOARD MEMBERS, RICHEY PIIPARINEN, SENIOR RESEARCH ASSOCIATE AND DIRECTOR OF THE CENTER FOR POPULATION DYNAMICS AT CLEVELAND STATE UNIVERSITY AND JOHN MINOR, PRESIDENT OF JOBSOHIO. 3) GLOBAL CLEVELAND EXPANDED THE CAPACITY OF ITS BOARD OF DIRECTORS WITH THE ADDITION OF ROB BRIGGS, PRESIDENT OF NORTHEAST OHIO COUNCIL ON HIGHER EDUCATION (NOCHE), JOE CABRAL, CHIEF HUMAN RESOURCES OFFICER FOR CLEVELAND CLINIC, MARI GALINDO-DASILVA, DIRECTOR OF LANGUAGE AND COMMUNITY ACCESS FOR THE METROHEALTH SYSTEM, WILLIAM H. GARY, SR., EXECUTIVE VICE PRESIDENT FOR THE WORKFORCE AND ECONOMIC DEVELOPMENT DIVISION AT CUYAHOGA COMMUNITY COLLEGE, FRED GEIS, CO-PRESIDENT OF GEIS COMPANIES, AND CATHERINE WURTS, LEAD SCHEDULER FOR EATON CORPORATION'S BROOKLYN FACILITY. SINCE ITS INCEPTION IN MAY 2011, GLOBAL CLEVELAND HAS MADE TREMENDOUS STRIDES IN BRINGING PUBLIC AWARENESS TO THE IMPORTANCE OF ATTRACTING, CONNECTING, AND WELCOMING NEWCOMERS TO THE REGION TO FILL JOBS AND STRENGTHEN GREATER CLEVELAND'S ECONOMY. THIS PROGRESS IS LARGELY DUE TO THE LEADERSHIP OF AN ENGAGED, COMMITTED BOARD OF DIRECTORS, THE GENEROUS SUPPORT OF MAJ</p>

Return Reference	Explanation	
	PART III, LINE 2	OR FUNDERS AND PARTNERS, AND ONGOING RESEARCH THAT IS USED TO CONTINUALLY REFINE GLOBAL CLEVELAND'S MISSION, STRATEGIC DIRECTION, AND ORGANIZATIONAL STRUCTURE. WHILE THERE IS NO ROADMAP FOR POPULATION GROWTH, GLOBAL CLEVELAND CONTINUES TO COLLABORATE WITH CIVIC, ECONOMIC DEVELOPMENT, INTERNATIONAL AND PHILANTHROPIC PARTNERS TO CREATE A WELCOMING COMMUNITY THAT IS ABLE TO ATTRACT AND RETAIN HIGH SKILLED TALENT, NEWCOMERS FROM AROUND THE WORLD WHOSE CONTRIBUTIONS WILL HELP TO CREATE ECONOMIC GROWTH AND PROSPERITY FOR ALL.



Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	<p>I ADVISORY BOARD MEMBERS VALERIE BERTINELLI AND TOM VITALE ARE MARRIED II GLOBAL CLEVELAND DIRECTORS ALBERT B RATNER, THOMAS W ADLER, DAVID FLESHLER AND THE HONORABLE DAN AARON POLSTER HAVE PHILANTHROPIC FUNDS MANAGED BY THE JEWISH FEDERATION OF CLEVELAND (JCF) THE HONORABLE DAN AARON POLSTER IS A BOARD MEMBER OF GLOBAL CLEVELAND AND THE FEDERATION GLOBAL CLEVELAND BOARD MEMBER OREN BARATZ IS VICE PRESIDENT OF EXTERNAL AFFAIRS FOR THE JEWISH FEDERATION OF CLEVELAND (JCF) III GLOBAL CLEVELAND DIRECTOR ALBERT B RATNER IS CO-CHAIRMAN EMERITUS FOR FOREST CITY ENTERPRISES, INC AND GLOBAL CLEVELAND DIRECTOR NEIL MOHNEY IS EXECUTIVE COORDINATOR FOR FOREST CITY ENTERPRISES, INC IV GLOBAL CLEVELAND DIRECTOR TOM WALTERMIRE, CEO OF TEAM NEO, RECEIVES FUNDING FROM THE CLEVELAND FOUNDATION RONALD RICHARD, CEO AND PRESIDENT FOR THE CLEVELAND FOUNDATION IS A DIRECTOR OF GLOBAL CLEVELAND V GLOBAL CLEVELAND DIRECTOR VALARIE J MCCALL IS CHIEF OF GOVERNMENT AND INTERNATIONAL AFFAIRS FOR THE CITY OF CLEVELAND AND HONORARY BOARD MEMBER FRANK G JACKSON IS MAYOR OF THE CITY OF CLEVELAND VI GLOBAL CLEVELAND DIRECTOR DANIEL P WALSH, JR , PRESIDENT OF THE HUNTINGTON NATIONAL BANK - GREATER CLEVELAND REGION WHERE GLOBAL CLEVELAND HAS ITS BANKING AND BROKERAGE ACCOUNTS AS WELL AS A LINE OF CREDIT VII GLOBAL CLEVELAND DIRECTOR SHANA MARBURY , GENERAL COUNSEL &amp; VICE PRESIDENT OF STRATEGIC INITIATIVES, GREATER CLEVELAND PARTNERSHIP, AFFILIATED WITH CLEVELAND DEVELOPMENT PARTNERS, THROUGH WHICH GLOBAL CLEVELAND HAS A CONSTRUCTION AND OPERATING LOAN VIII GLOBAL CLEVELAND DIRECTOR, SHEILA WRIGHT, IS DIRECTOR OF COMMUNITY AFFAIRS FOR THE GOOD COMMUNITIES FOUNDATION, A FOUNDATION FUNDED BY ALBERT B RATNER WHO IS ALSO A GLOBAL CLEVELAND DIRECTOR</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	PRIOR TO FILING, GLOBAL CLEVELAND STAFF AND BOARD CHAIR REVIEWS THE 990 THE DOCUMENT IS REVIEWED BY THE FINANCE COMMITTEE, THEN SUBMITTED TO THE EXECUTIVE COMMITTEE AND BOARD FOR FINAL APPROVAL

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	A CONFLICT OF INTEREST POLICY IS PART OF GLOBAL CLEVELAND'S CODE OF REGULATIONS. BOARD MEMBERS ANNUALLY SIGN A STATEMENT INDICATING THEY UNDERSTAND THE POLICY AND DISCLOSE ANY AREAS THAT MAY GIVE RISE TO A POTENTIAL CONFLICT OF INTEREST. THE BOARD PERIODICALLY REVIEWS AND MONITORS ALL CONFLICTS OF INTEREST. DIRECTORS REFRAIN FROM VOTING ON THOSE ISSUES WHERE THE OPPORTUNITY OR APPEARANCE OF A POTENTIAL CONFLICT MAY EXIST.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE COMMITTEE, IN CONSULTATION WITH THE FINANCE COMMITTEE, DETERMINES THE PRESIDENT'S COMPENSATION AFTER 1) COMPARING INDUSTRY DATA, 2) COMPENSATION OF TOP MANAGEMENT OFFICIAL COMPARABLE NONPROFITS WITH SIMILAR MISSIONS AND/OR SIZE, AND 3) CONSIDERING LEVEL OF EXPERIENCE. THE BOARD OF DIRECTORS APPROVES HIS/HER EMPLOYMENT CONTRACT

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	OTHER PROGRAM SERVICE EXPENSES 225,277 MANAGEMENT AND GENERAL EXPENSES 28,086 FUNDRAISING EXPENSES 9,356 TOTAL EXPENSES 262,719

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THERE HAS BEEN NO CHANGES FROM PRIOR YEAR