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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2020

Open to Public Inspection

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

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

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

A For the 2020 calendar year, or tax year beginning 10-01-2020 , and ending 09-30-2021

B Check if applicable:
☒ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
GLOBAL TIES US

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1000 VERMONT AVE NW NO 12000

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20005

D Employer identification number

52-0848094

E Telephone number

(301) 503-9403

G Gross receipts \$ 13,346,320

F Name and address of principal officer:
KATHERINE BROWN PHD
1000 VERMONT AVE NW NO 12000
WASHINGTON, DC 20005

H(a) Is this a group return for subordinates?
☐ Yes ☒ No
H(b) Are all subordinates included?
☐ Yes ☐ No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.GLOBALTIESUS.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1965

M State of legal domicile: DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO BUILD TRUST AND ADVANCE PEACE AND PROSPERITY THOUGH INTERNATIONAL EXCHANGE.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 3 16

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 16

5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 23

6 Total number of volunteers (estimate if necessary) 6 16

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0

7b Net unrelated business taxable income from Form 990-T, line 39 7b 0

Revenue

8 Contributions and grants (Part VIII, line 1h) 8,870,337 13,194,174

9 Program service revenue (Part VIII, line 2g) 230,025 116,865

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 18,780

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11,755 16,501

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9,112,117 13,346,320

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 5,666,388 10,139,214

14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1,869,403 2,079,550

16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0

16b Total fundraising expenses (Part IX, column (D), line 25) ▶164,673

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 1,712,731 1,600,560

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 9,248,522 13,819,324

19 Revenue less expenses. Subtract line 18 from line 12 -136,405 -473,004

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 2,901,875 4,542,167

21 Total liabilities (Part X, line 26) 1,848,274 3,805,979

22 Net assets or fund balances. Subtract line 21 from line 20 1,053,601 736,188

Part II Signature Block

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

Sign Here

Signature of officer
KATHERINE BROWN PHD, PRESIDENT AND CEO
Type or print name and title

2022-08-15
Date

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date 2022-08-15 Check ☐ if self-employed PTIN P00635175

Firm's name ▶ CLIFTONLARSONALLEN LLP Firm's EIN ▶ 41-0746749

Firm's address ▶ 901 NORTH GLEBE ROAD SUITE 200 ARLINGTON, VA 22203 Phone no. (571) 227-9500

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2020)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

GLOBAL TIES U.S. (GLOBAL TIES) STRENGTHENS RELATIONSHIPS BETWEEN INDIVIDUALS AND NATIONS BY MAKING INTERNATIONAL EXCHANGE PROGRAMS MORE EFFECTIVE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

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

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

4a	(Code:) (Expenses \$	11,513,111	including grants of \$	10,023,146) (Revenue \$	)
See Additional Data					

4b	(Code:) (Expenses \$	987,377	including grants of \$	107,563) (Revenue \$	)
See Additional Data					

4c	(Code:) (Expenses \$	442,112	including grants of \$	1,600) (Revenue \$	)
See Additional Data					

	(Code:) (Expenses \$	242,201	including grants of \$	6,906) (Revenue \$	116,865)
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GLOBAL TIES U.S. PROVIDES ITS MEMBERS WITH INTERNATIONAL AND DOMESTIC CONNECTIONS, LEADERSHIP DEVELOPMENT, AND PROFESSIONAL RESOURCES TO ENSURE THEY ARE THE STRONGEST, MOST EFFECTIVE ORGANIZATIONS THEY CAN BE. OUR SERVICES INCLUDE: (1) NATIONAL LEADERSHIP AND REPRESENTATION; (2) RESOURCES FOR NON-PROFIT MANAGEMENT; (3) PROFESSIONAL DEVELOPMENT AND TRAINING; (4) FINANCIAL RESOURCES IN THE FORM OF SUBGRANTS; (5) EDUCATING AND ENGAGING CONGRESS; (6) INTERNATIONAL EXCHANGE PROGRAM DEVELOPMENT AND IMPLEMENTATION; (7) TECHNOLOGY AND COMMUNICATION SUPPORT.

4d	Other program services (Describe in Schedule O.)				
	(Expenses \$	242,201	including grants of \$	6,906) (Revenue \$	116,865)

4e	Total program service expenses ▶	13,184,801			
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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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4	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 Yes	
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 Yes	
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 Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
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	No
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 Yes	
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	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 	21 Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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? If "Yes," complete Schedule L, Part I	25b	No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	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? If "Yes," complete Schedule R, Part I	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	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? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	68
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

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

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	23			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		Yes		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			No	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b				
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)?	4a			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?	5a			No	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No	
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			No	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7 Organizations that may receive deductible contributions under section 170(c).					
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			No	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No	
d If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			No	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8				
9 Sponsoring organizations maintaining donor advised funds.					
a Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10 Section 501(c)(7) organizations. Enter:					
a Initiation fees and capital contributions included on Part VIII, line 12	10a				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11 Section 501(c)(12) organizations. Enter:					
a Gross income from members or shareholders	11a				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a				
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c Enter the amount of reserves on hand	13c				
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a			No	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b				
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 720, Schedule N.	15			No	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			No	

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.	1a	16
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	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?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	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	9	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?	10a	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?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	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	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	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	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	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	15a	Yes
b	Other officers or key employees of the organization	15b	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?	16a	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?	16b	

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-A 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:
▶KATHERINE BROWN PHD 1000 VERMONT AVE NW WASHINGTON, DC 20005 (301) 503-9403

Part VII

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(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) CHRISTOPHER WASHINGTON CHAIR	5.00	X		X				0	0	0
(2) JACQUELINE MILLER VICE CHAIR	5.00	X		X				0	0	0
(3) DIANA BUCCO TREASURER	5.00	X		X				0	0	0
(4) HENRY COLLINS SECRETARY	5.00	X		X				0	0	0
(5) ANA ALEMAN DIRECTOR	3.00	X						0	0	0
(6) PETER ASAAD DIRECTOR	3.00	X						0	0	0
(7) MARTIN BAIER DIRECTOR	3.00	X						0	0	0
(8) ELIZABETH KUMBHARI DIRECTOR	3.00	X						0	0	0
(9) DERRICK OLSEN DIRECTOR	3.00	X						0	0	0
(10) PATRICIA HARRISON DIRECTOR	3.00	X						0	0	0
(11) BARBARA KELLER DIRECTOR	3.00	X						0	0	0
(12) ROBIN LERNER DIRECTOR	3.00	X						0	0	0
(13) CHERYL MATHERLY DIRECTOR	3.00	X						0	0	0
(14) PATRICIA PRESTON DIRECTOR	3.00	X						0	0	0
(15) MUDASSAR AHMED DIRECTOR	3.00	X						0	0	0
(16) JONATHAN QUARLES DIRECTOR	3.00	X						0	0	0
(17) KATHERINE BROWN PRESIDENT & CEO	37.00			X				177,610	0	21,799
	3.00									

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(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			
(18) UKEME FALADE DIRECTOR, FINANCE & OPERATION	40.00			X				143,010	0	13,668
(19) JASON TERRY DIRECTOR, EXCHANGE PROGRAMS	40.00					X		113,704	0	12,695
(20) FRANZISKA ROOK TEAM LEADER FOR TRAINING & COMMUNITY DEVELOPME	40.00					X		110,486	0	15,400
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								544,810	0	63,562

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 **▶ 4**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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>	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>		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

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 **▶ 0**

Part VIII		Statement of Revenue					
Check if Schedule O contains a response or note to any line in this Part VIII ☐							
		(A)	(B)	(C)	(D)		
		Total revenue	Related or exempt function revenue	Unrelated business revenue	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	13,132,049				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	62,125				
	g Noncash contributions included in lines 1a - 1f:\$	1g					
	h Total. Add lines 1a-1f ▶	13,194,174					
Program Service Revenue			Business Code				
	2a OTHER PROGRAM REVENUE	900099	46,375	46,375			
	b MEMBERSHIP DUES	900099	36,779	36,779			
	c CONFERENCES & EVENTS	900099	33,711	33,711			
	d						
	e						
	f All other program service revenue.						
g Total. Add lines 2a-2f. ▶	116,865						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		18,780			18,780	
	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						
		8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events . . . ▶						
	9a Gross income from gaming activities. See Part IV, line 19						
		9a					
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities . . . ▶							
10a Gross sales of inventory, less returns and allowances . . .							
	10a						
b Less: cost of goods sold . . .	10b						
c Net income or (loss) from sales of inventory . . . ▶							
Miscellaneous Revenue		Business Code					
11a OTHER INCOME	900099	16,501				16,501	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d ▶		16,501					
12 Total revenue. See instructions ▶		13,346,320	116,865	0		35,281	

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	10,138,059	10,138,059		
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.	1,155	1,155		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	354,585	182,466	172,119	
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	1,171,037	1,018,099	108,784	44,154
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	96,401	50,598	43,580	2,223
9 Other employee benefits	316,210	190,661	119,019	6,530
10 Payroll taxes	141,317	112,032	25,077	4,208
11 Fees for services (non-employees):				
a Management				
b Legal	8,901		8,901	
c Accounting	53,458	24,700	28,758	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	120		120	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	619,191	459,045	87,999	72,147
12 Advertising and promotion				
13 Office expenses	20,253	1,338	18,653	262
14 Information technology	198,569	150,423	46,646	1,500
15 Royalties				
16 Occupancy	313,220	12,780	300,440	
17 Travel	215,106	215,106		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	48,131	44,647		3,484
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,814		4,814	
23 Insurance	16,086		16,086	
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 COMMUNICATION	51,866	400	51,466	
b PROFESSIONAL DEVELOPMEN	23,472		23,385	87
c LICENSES AND FEES	6,786	1,360	4,848	578
d INDIRECT COST ALLOCATIO	0	581,626	-610,955	29,329
e All other expenses	20,587	306	20,110	171
25 Total functional expenses. Add lines 1 through 24e	13,819,324	13,184,801	469,850	164,673
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	117,782	1	351,160
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	589,516	3	707,959
	4 Accounts receivable, net	1,077,149	4	2,055,993
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	20,507	9	80,008
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 47,327		
	b Less: accumulated depreciation	10b 24,603	21,860	10c 22,724
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11	912,961	12	1,089,384
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	162,100	15	234,939
16 Total assets. Add lines 1 through 15 (must equal line 33)	2,901,875	16	4,542,167	
Liabilities	17 Accounts payable and accrued expenses	250,446	17	846,704
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	244,774	24	244,774
	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	1,353,054	25	2,714,501
	26 Total liabilities. Add lines 17 through 25	1,848,274	26	3,805,979
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	865,040	27	555,877
	28 Net assets with donor restrictions	188,561	28	180,311
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	1,053,601	32	736,188	
33 Total liabilities and net assets/fund balances	2,901,875	33	4,542,167	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,346,320
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,819,324
3	Revenue less expenses. Subtract line 2 from line 1	3	-473,004
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,053,601
5	Net unrealized gains (losses) on investments	5	155,591
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 32, column (B))	10	736,188

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

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ 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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	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?	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Yes	

Additional Data

Software ID:

Software Version:

EIN: 52-0848094

Name: GLOBAL TIES US

Form 990 (2020)

Form 990, Part III, Line 4a:

INTERNATIONAL VISITORS LEADERSHIP PROGRAM (IVLP): IN COLLABORATION WITH THE DEPARTMENT OF STATE, WE EQUIP OUR NETWORK WITH THE CAPACITY FOR VIRTUAL PROGRAMMING, SUPPORTING THEM WITH HARDWARE, SOFTWARE, TRAINING, AND ADMINISTRATION COSTS FOR THE VIRTUAL PROGRAMMING.

Form 990, Part III, Line 4b:

U.S. PAVILION AT EXPO DUBAI 2020: IN PARTNERSHIP WITH THE DEPARTMENT OF STATE, WE RECRUITED YOUTH AMBASSADORS AND CULTURAL PERFORMERS TO REPRESENT THE U.S. AS CITIZEN AMBASSADORS AT THE U.S. PAVILION. WE ALSO TO SUPPORT RESEARCH ON THE IMPACT OF EXPO INSIDE THE U.S.

Form 990, Part III, Line 4c:

POLICE PROFESSIONALIZATION EXCHANGE PROGRAM: WE CONDUCTED THE PROGRAM TO A VIRTUAL PROGRAM THROUGH A SERIES OF INTENSIVE, MULTI-DAY WEBINAR ENGAGEMENTS, AS WELL AS MULTI-WEEK ONLINE TRAININGS. WORKING WITH OUR NETWORK, WE ALSO CONDUCTED A COMMUNITY POLICING VIDEO SERIES TO COMPLEMENT LIVE TRAINING SESSIONS.

SCHEDULE A
(Form 990 or 990-EZ)

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
GLOBAL TIES US

Employer identification number
52-0848094

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 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- 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- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . .						
6	Public support. Subtract line 5 from line 4.						

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4. . .						
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.). . .						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First 5 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		
14	Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14
15	Public support percentage for 2019 Schedule A, Part II, line 14	15
16a	33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐	
b	33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐	
17a	10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐	
b	10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐	

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7,688,062	8,876,164	10,269,917	8,870,337	13,194,174	48,898,654
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	723,446	339,454	483,870	230,025	116,865	1,893,660
3 Gross receipts from activities that are not an unrelated trade or business under section 513			39,825			39,825
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	8,411,508	9,215,618	10,793,612	9,100,362	13,311,039	50,832,139
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	11,750	8,250	5,942	22,000	15,625	63,567
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.						0
c Add lines 7a and 7b.	11,750	8,250	5,942	22,000	15,625	63,567
8 Public support. (Subtract line 7c from line 6.)						50,768,572

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6.	8,411,508	9,215,618	10,793,612	9,100,362	13,311,039	50,832,139
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	18,844	24,882			18,780	62,506
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.	18,844	24,882			18,780	62,506
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.)	677	3,188	880	11,755	16,501	33,001
13 Total support. (Add lines 9, 10c, 11, and 12.)	8,431,029	9,243,688	10,794,492	9,112,117	13,346,320	50,927,646
14 First 5 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 2020 (line 8, column (f) divided by line 13, column (f))	15	99.690 %
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	99.720 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f))	17	0.120 %
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	0.100 %

19a 33 1/3% support tests—2020. 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—2019. 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 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, 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 Part VI 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 Part VI 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 lines 3b and 3c 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 Part VI 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 Part VI 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
5a		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5b		
c Substitutions only. 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
6		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .		
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 I of Schedule L (Form 990 or 990-EZ).		
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 Part VI .		
9a		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
9b		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
9c		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
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		

Part IV

Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the officers, 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

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 ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI. the role played by the organization in this regard.</i>		

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 (<i>explain in Part VI</i>). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by Line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required-- explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2020:		
a	From 2015.		
b	From 2016.		
c	From 2017.		
d	From 2018.		
e	From 2019.		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2020 distributable amount		
i	Carryover from 2015 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2020 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2020 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2021. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2016.		
b	Excess from 2017.		
c	Excess from 2018.		
d	Excess from 2019.		
e	Excess from 2020.		

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME:	OTHER INCOME - 2016 AMOUNT: \$ 677. 2017 AMOUNT: \$ 3,188. 2018 AMOUNT: \$ 880. 2019 AMOUNT: \$ 11,755. 2020 AMOUNT: \$ 16,501.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization GLOBAL TIES US	Employer identification number 52-0848094
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")	
2	Political campaign activity expenditures (see instructions)	▶ \$
3	Volunteer hours for political campaign activities (see instructions)	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV.	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.	

	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1					
2					
3					
4					
5					
6					

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	0													
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures	13,813,654													
e	Total exempt purpose expenditures (add lines 1c and 1d)	13,813,654													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	840,683													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	210,171													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No														

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	617,997	682,459	612,426	840,683	2,753,565
b Lobbying ceiling amount (150% of line 2a, column(e))					4,130,348
c Total lobbying expenditures	5,603				5,603
d Grassroots nontaxable amount	154,499	170,615	153,107	210,171	688,392
e Grassroots ceiling amount (150% of line 2d, column (e))					1,032,588
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
GLOBAL TIES US

Employer identification number
52-0848094

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ 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	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB 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 FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

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

a Revenue included on 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) 2020

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☐ No

b

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

c

Beginning balance

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" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	188,561	188,561	209,896	197,423	234,319
b Contributions	2,000				
c Net investment earnings, gains, and losses	3,108	19,440	4,766	12,473	20,345
d Grants or scholarships					
e Other expenditures for facilities and programs	13,358	19,499	26,101		57,241
f Administrative expenses					
g End of year balance	180,311	188,561	188,561	209,896	197,423

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 ▶ 5.546 %

c

Term endowment ▶ 94.450 %

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

3a

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

(i) Unrelated organizations

3a(i)

Yes

No

(ii) Related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		15,037	7,015	8,022
d Equipment		32,290	17,588	14,702
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				22,724

Schedule D (Form 990) 2020

Part VII

Investments—Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) MUTUAL FUND	1,089,384	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	1,089,384	

Part VIII

Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX

Other Assets.

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

(a) Description	(b) Book value
(1) REFUNDABLE DEPOSITS	77,736
(2) DUE FROM FOUNDATION	157,203
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	234,939

Part X

Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	217,033
(3) REFUNDABLE ADVANCE	2,497,468
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	2,714,501

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

☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

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

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

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

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

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
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-0848094
Name: GLOBAL TIES US

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	GLOBAL TIES INTENDS TO USE ENDOWMENT FUNDS FOR SCHOLARSHIPS FOR INTERNS, ADVOCACY, AND SPECIAL PROJECTS.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	GLOBAL TIES U.S. AND GLOBAL TIES FOUNDATION ARE ORGANIZED AS NONPROFIT CORPORATIONS AND HAVE BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE (IRS) AS EXEMPT FROM FEDERAL INCOME TAXES UNDER IRC SECTION 501(A) AS ORGANIZATIONS DESCRIBED IN INTERNAL REVENUE CODE (IRC) SECTION 501(C)(3), AND HAVE BEEN DETERMINED NOT TO BE PRIVATE FOUNDATIONS. EACH ENTITY IS ANNUALLY REQUIRED TO FILE A RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX (FORM 990) WITH THE IRS. IN ADDITION, THE ENTITIES ARE SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO THEIR EXEMPT PURPOSES. MANAGEMENT HAS DETERMINED THAT EACH ENTITY IS NOT SUBJECT TO UNRELATED BUSINESS INCOME TAX.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service
Name of the organization
GLOBAL TIES US

Employer identification number
52-0848094

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 105

3 Enter total number of other organizations listed in the line 1 table 0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	GLOBAL TIES U.S. (GTUS) RECEIVES FEDERAL FUNDS THROUGH THE BUREAU OF EDUCATION AND CULTURAL AFFAIRS (ECA) OF THE UNITED STATES DEPARTMENT OF STATE (STATE). FUNDING MECHANISM: GTUS HAS A COOPERATIVE AGREEMENT WITH STATE, THE PURPOSE OF WHICH IS TO: SUPPORT THE GTUS ADMINISTRATIVE COSTS AND PROVIDE FUNDING FOR THE ECA COMMUNITY PARTNERSHIP GRANTS THROUGH WHICH LOCAL SPONSORS ARE AWARDED SUB-AWARDS TO ASSIST THEM IN PROGRAMMING FOR THE INTERNATIONAL VISITOR LEADERSHIP PROGRAM. THE GTUS MEMBERS, ALSO KNOWN AS COMMUNITY BASED MEMBERS (CBMS), ARRANGE PROFESSIONAL AND CULTURAL EXCHANGE PROGRAMS FOR ECA-SPONSORED INTERNATIONAL VISITORS EACH YEAR. A LARGE PORTION OF THE FUNDS GTUS RECEIVES IS REQUIRED TO BE SUB-AWARDED TO THE CBMS. AS A FEDERAL GRANTEE, GTUS IS RESPONSIBLE FOR MONITORING SUB-AWARDEES AND ENSURING THAT FISCAL, COMPLIANCE, AND PROGRAMMATIC RESPONSIBILITIES ARE FULFILLED. THIS INCLUDES MONITORING SUB-AWARDEES REPORTING, RECORDKEEPING, AND INTERNAL OPERATIONS AND CONTROLS. GTUS IS REQUIRED TO PERFORM SUB-AWARDEE MONITORING TO ENSURE THAT FUNDS ARE USED FOR THEIR INTENDED PURPOSES AND THAT THERE ARE NO AUDIT FINDINGS THAT MAY ADVERSELY AFFECT THE USE OF THE GRANT FUNDS. SUB-AWARDEE MONITORING EFFORTS ARE CARRIED OUT IN COLLABORATION WITH THE OFFICE OF INTERNATIONAL VISITORS OF ECA. WHILE A NUMBER OF GTUS'S SUB-AWARDEE MONITORING EFFORTS ARE COMMON TO EACH OF THE FEDERALLY-FUNDED PROGRAMS, THERE ARE ALSO A SERIES OF MONITORING EFFORTS DEDICATED TO MANAGEMENT OF THE CBMS, WHICH ARE IMPLEMENTED ON A CASE-BY-CASE OR AS-NEEDED BASIS TO ACCOMMODATE THE DIFFERENT ENVIRONMENT AND NEEDS OF EACH CBM. AS PART OF THE APPLICATION PROCESS, GTUS UNDERSTANDS THE CBM'S DESCRIPTION OF THEIR FINANCIAL CONTROL PROCESSES AND ASSESS THE RISKS RELATED TO THE CONTROL ENVIRONMENT OF THE CBM. APPLICANTS THAT ARE HIGH RISK WILL HAVE RECEIVED SPECIALIZED MONITORING OR MAY NOT RECEIVE FEDERAL FUNDS.

Additional Data

Software ID:
Software Version:
EIN: 52-0848094
Name: GLOBAL TIES US

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOULDER COUNCIL FOR INTERNATIONAL VISITORS 700 GRANT PLACE BOULDER, CO 80302	84-0698597	501C3	42,203		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
CHARLESTON COUNCIL FOR INTERNATIONAL VISITORS 171 MOULTRIE STREET CHARLESTON, SC 29404	57-0913604	501C3	36,240		N/A		IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLESTON COUNCIL FOR INTERNATIONAL VISITORS PO BOX 50954 CHARLESTON, SC 29250	57-0913604	501C3	3,050		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
CITIZEN DIPLOMACY ALLIANCE (SOUTHERN ARIZONA COUNCIL FOR INTL VISITORS) 1240 E MISSOURI AVE SUITE 205 TUCSON, AZ 85014	23-7003229	501C3	33,190		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITIZEN DIPLOMACY INTERNATIONAL OF PHILADELPHIA 305 34TH STREET PHILADELPHIA, PA 15201	25-6067678	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
CITIZEN DIPLOMACY INTERNATIONAL OF PHILADELPHIA 305 34TH STREET PHILADELPHIA, PA 15201	25-6067678	501C3	170,908		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEVELAND COUNCIL ON WORLD AFFAIRS 57 JEFFERSON AVENUE CLEVELAND, OH 43215	31-6078889	501C3	226,369		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
COLORADO SPRINGS WORLD AFFAIRS COUNCIL PO BOX 608 COLORADO SPRINGS, CO 80901	74-2144723	501C3	106,341		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLUMBIA COUNCIL FOR INTERNATIONALS OFFICE OF FELLOWSHIPS THE CITADEL 191 SMITH STREET COLUMBIA, SC 29403	20-3369292	501C3	23,884		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
COUNCIL FOR INTERNATIONAL VISITORS TO IOWA CITIES (CIVIC) 3839 MERLE HAY ROAD SUITE 259 IOWA CITY, IA 50310	42-0944296	501C3	94,674		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DACOTAH TERRITORY INTERNATIONAL VISITOR PROGRAM PO BOX 3532 RAPID CITY, SD 57709	46-0443218	501C3	30,182		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
EL PASO COUNCIL FOR INTERNATIONAL VISITORS 1103 WEST 24TH STREET SUITE 212 EL PASO, TX 78705	74-1383241	501C3	3,844		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EL PASO COUNCIL FOR INTERNATIONAL VISITORS 1103 WEST 24TH STREET SUITE 212 EL PASO, TX 78705	74-1383241	501C3	94,357		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
FREEPORT AREA INTERNATIONAL VISITORS COUNCIL 4277 PRESTON ST FREEPORT, IL 61944	36-3950588	501C3	5,737		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGIA COUNCIL FOR INTERNATIONAL VISITORS 821 RALPH MCGILL BOULEVARD NE SUITE 2115 ATLANTA, GA 30306	58-0940926	501C3	252,722		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GEORGIA COUNCIL FOR INTERNATIONAL VISITORS 821 RALPH MCGILL BOULEVARD NE SUITE 2115 ATLANTA, GA 30306	58-0940926	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL MINNESOTA 1901 UNIVERSITY AVENUE SE MINNEAPOLIS, MN 55414	41-0826559	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
GLOBAL MINNESOTA 1901 UNIVERSITY AVENUE SE MINNEAPOLIS, MN 55414	41-0826559	501C3	214,244		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES ABQ PO BOX 30485 ALBUQUERQUE, NM 87190	85-0338419	501C3	168,175		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBAL TIES ABQ PO BOX 30485 ALBUQUERQUE, NM 87190	85-0338419	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES AKRON 812 HURON ROAD SUITE 620 AKRON, OH 44115	34-0720549	501C3	121,726		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBAL TIES ALABAMA 4920 UNIVERSITY SQUARE SUITE A HUNTSVILLE, AL 35816	63-0506191	501C3	68,839		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES ALABAMA 4920 UNIVERSITY SQUARE SUITE A HUNTSVILLE, AL 35816	63-0506191	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
GLOBAL TIES ARIZONA PIMA COMMUNITY COLLEGE INTERNATIONA DIVISION 2202 W ANKLAM RD SCOTTSDALE, AZ 85709	86-0309326	501C3	172,788		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES ARKANSAS 16 TOULOUSE CT LITTLE ROCK, AR 72211	71-0562233	501C3	85,344		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBAL TIES DETROIT 225 WEST WALNUT STREET SUITE 209 DETROIT, MI 49007	38-3051840	501C3	128,720		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES IDAHO (IDAHO COUNCIL FOR INTERNATIONAL VISITORS) PO BOX 140505 BOISE, ID 83714	20-5719400	501C3	37,802		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBAL TIES IDAHO (IDAHO COUNCIL FOR INTERNATIONAL VISITORS) PO BOX 140505 BOISE, ID 83714	20-5719400	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES KALAMAZOO (COLLEAGUES INTERNATIONAL INC) MICHIGAN STATE UNIVERSITY 427 NORTH SHAW LANE ROOM 1F KALAMAZOO, MI 48824	38-6005984	501C3	159,285		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBAL TIES KC 812 OLIVE STREET SUITE 110 KANSAS CITY, MO 63101	43-6040974	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES KC 812 OLIVE STREET SUITE 110 KANSAS CITY, MO 63101	43-6040974	501C3	209,918		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBAL TIES MIAMI 547 FIRST STREET SOUTH SUITE 200 CORAL GABLES, FL 33701	59-3651710	501C3	219,264		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES SACRAMENTO (NORTHERN CALIFORNIA WORLD TRADE CENTER) 11278 BUNCHE HALL BOX 951487 405 HILGARD AVENUE SACRAMENTO, CA 90095	95-6006143	501C3	254,498		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBAL TIES SACRAMENTO (NORTHERN CALIFORNIA WORLD TRADE CENTER) 11278 BUNCHE HALL BOX 951487 405 HILGARD AVENUE SACRAMENTO, CA 90095	95-6006143	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES SAN FRANCISCO 4305 UNIVERSITY AVENUE SUITE 510 SAN FRANCISCO, CA 92105	95-3477071	501C3	352,691		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBAL TIES SAN FRANCISCO 4305 UNIVERSITY AVENUE SUITE 510 SAN FRANCISCO, CA 92105	95-3477071	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL TIES WYOMING PO BOX 10195 JACKSON, WY 39217	64-6000507	501C3	4,875		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
GLOBALAUSTIN 325 NORTH SAINT PAUL ST SUITE 4200 AUSTIN, TX 75201	75-0855628	501C3	3,844		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBALAUSTIN 325 NORTH SAINT PAUL ST SUITE 4200 AUSTIN, TX 75201	75-0855628	501C3	154,019		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GLOBALJAX 2850 S DOUGLAS ROAD SUITE 201 JACKSONVILLE, FL 331346925	59-6153212	501C3	74,334		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBALPITTSBURGH PIPELINE PHILADELPHIA WORKSPACES 30 S 15TH STREET 15TH FLOOR PITTSBURGH, PA 19102	23-1489115	501C3	102,494		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
GRAND ISLAND AREA COUNCIL FOR INTERNATIONAL VISITORS PO BOX 5014 GRAND ISLAND, NE 68802	47-0831535	501C3	4,072		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GULF COAST DIPLOMACY (GULF COAST CITIZEN DIPLOMACY COUNCIL) 100 FESTIVAL PARK AVE PENSACOLA, FL 32202	59-3032070	501C3	116,637		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
INTERNATIONAL CENTER OF SYRACUSE 864 DELAWARE AVENUE SYRACUSE, NY 14209	16-0743052	501C3	16,227		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL CENTER OF THE CAPITAL REGION UNIVERSITY OF ROCHESTER PO BOX 270449 TROY, NY 146270449	16-0877269	501C3	35,196		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
INTERNATIONAL FOCUS INC PO BOX 39809 RALEIGH, NC 27438	56-1729107	501C3	90,693		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL HOUSE 1817 CENTRAL AVENUE SUITE 215 CHARLOTTE, NC 28205	58-1440413	501C3	118,727		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
INTERNATIONAL INSTITUTE OF BUFFALO 65 FIRST STREET HART HALL ROOM 306 BUFFALO, NY 12180	14-6012797	501C3	85,322		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL INSTITUTE OF WISCONSIN 1110 NORTH OLD WORLD THIRD STREET SUITE 420 MILWAUKEE, WI 53203	39-0806350	501C3	2,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
INTERNATIONAL INSTITUTE OF WISCONSIN 1110 NORTH OLD WORLD THIRD STREET SUITE 420 MILWAUKEE, WI 53203	39-0806350	501C3	150,196		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL VISITORS CENTER OF JACKSON JACKSON STATE UNIVERSITY PO BOX 17103 JACKSON, MS 39217	64-6000507	501C3	16,008		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
INTERNATIONAL VISITORS COUNCIL OF LOS ANGELES (IVCLA) ONE CAPITOL MALL SUITE 700 LOS ANGELES, CA 95814	91-1811449	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL VISITORS COUNCIL OF LOS ANGELES (IVCLA) ONE CAPITOL MALL SUITE 700 LOS ANGELES, CA 95814	91-1811449	501C3	357,318		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
INTERNATIONAL VISITORS COUNCIL INC SUITE 223 QUAKER SQUARE THE UNIVERSITY OF AKRON COLUMBUS, OH 44325	34-1433786	501C3	50,737		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IOWA INTERNATIONAL CENTER 26 E MARKET ST 241 DES MOINES, IA 52245	42-0944296	501C3	168,578		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
LINCOLN COUNCIL FOR INTERNATIONAL VISITORS 6156 S 102ND ST LINCOLN, NE 68127	91-1764233	501C3	73,703		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MICHIGAN COUNCIL ON CITIZEN DIPLOMACY TECHTOWN 440 BURROUGHS SUITE 329 EAST LANSING, MI 48202	38-1981715	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
MICHIGAN COUNCIL ON CITIZEN DIPLOMACY TECHTOWN 440 BURROUGHS SUITE 329 EAST LANSING, MI 48202	38-1981715	501C3	67,449		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINOT AREA COUNCIL FOR INTERNATIONAL VISITORS C/O MINOT STATE UNIVERSITY 500 UNIVERSITY WEST MINOT, ND 58707	45-6002481	501C3	979		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
NC GLOBAL LEADERSHIP PO BOX 46842 GREENSBORO, NC 27620	58-1440413	501C3	60,753		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ORLEANS CITIZEN DIPLOMACY COUNCIL 1215 PRYTANIA ST SUITE 203 NEW ORLEANS, LA 70130	72-1196697	501C3	200,627		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
NEW ORLEANS CITIZEN DIPLOMACY COUNCIL 1215 PRYTANIA ST SUITE 203 NEW ORLEANS, LA 70130	72-1196697	501C3	1,600		N/A	N/A	IMPLEMENTATION OF INL WEBINAR PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHERN NEVADA INTERNATIONAL CENTER UNIVERSITY OF NEVADA RENO 855 W 7TH STREET SUITE 270 MS/0410 RENO, NV 89503	94-2796785	501C3	212,764		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
NORTHERN NEVADA INTERNATIONAL CENTER UNIVERSITY OF NEVADA RENO 855 W 7TH STREET SUITE 270 MS/0410 RENO, NV 89503	94-2796785	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC & ASIAN AFFAIRS COUNCIL 1601 EAST-WEST ROAD 4059 HONOLULU, HI 96848	99-0073501	501C3	78,725		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
SAN ANTONIO COUNCIL FOR INTERNATIONAL VISITORS 816 CAMARON STREET SUITE NO 215 SAN ANTONIO, TX 78212	74-2726236	501C3	101,316		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN ANTONIO COUNCIL FOR INTERNATIONAL VISITORS 4409 SUE CIRCLE SAN ANTONIO, TX 78410	65-1217862	501C3	44,074		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
SAN DIEGO DIPLOMACY COUNCIL 2891 CANYON CREST DRIVE 60 SAN DIEGO, CA 92105	95-3477071	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN DIEGO DIPLOMACY COUNCIL 2891 CANYON CREST DRIVE 60 SAN DIEGO, CA 92105	95-3477071	501C3	5,000		N/A	N/A	IMPLEMENTATION OF MERGE PROGRAM
SAN DIEGO DIPLOMACY COUNCIL 2891 CANYON CREST DRIVE 60 SAN DIEGO, CA 92105	95-3477071	501C3	253,994		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE COUNCIL ON INTERNATIONAL RELATIONS 413 GRANT AVENUE SUITE D SANTA FE, NM 87501	85-0196904	501C3	241,414		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
THE INTERNATIONAL CENTER ONE INDIANA SQUARE SUITE 2000 INDIANAPOLIS, IN 46204	35-1300785	501C3	92,205		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE INTERNATIONAL CENTER ONE INDIANA SQUARE SUITE 2000 INDIANAPOLIS, IN 46204	35-1300785	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
THE PRESIDENTIAL PRECINCT 427 PARK STREET CHARLOTTESVILLE, VA 22902	46-1084540	501C3	35,690		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE WORLD AFFAIRS COUNCIL OF WESTERN MASSACHUSETTS 33 BROAD STREET SUITE 803 SPRINGFIELD, MA 02210	04-6121813	501C3	28,660		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
TULSA GLOBAL ALLIANCE 700 NORTH GREENWOOD AVENUE TULSA, OK 74106	73-1017401	501C3	85,836		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UCLA INTERNATIONAL VISITORS BUREAU 3450 WILSHIRE BOULEVARD SUITE 705 LOS ANGELES, CA 90095	95-6006143	501C3	153,768		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
UTAH COUNCIL FOR CITIZEN DIPLOMACY (UCCD) 1840 SOUTH 1300 EAST SALT LAKE CITY, UT 84105	87-6188308	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UTAH COUNCIL FOR CITIZEN DIPLOMACY (UCCD) 1840 SOUTH 1300 EAST SALT LAKE CITY, UT 84105	87-6188308	501C3	243,122		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
VERMONT COUNCIL ON WORLD AFFAIRS 60 MAIN STREET SUITE 100 BURLINGTON, VT 05401	03-6010787	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VERMONT COUNCIL ON WORLD AFFAIRS 60 MAIN STREET SUITE 100 BURLINGTON, VT 05401	03-6010787	501C3	103,871		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLD AFFAIRS COUNCIL - CINCINNATI & NORTHERN KENTUCKY 2500 MONTGOMERY STREET SUITE 6 HIGHLAND HEIGHTS, KY 40212	61-1078276	501C3	168,043		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD AFFAIRS COUNCIL - SEATTLE 2200 ALASKAN WAY SUITE 450 SEATTLE, WA 98121	91-0586924	501C3	324,913		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLD AFFAIRS COUNCIL - SEATTLE 2200 ALASKAN WAY SUITE 450 SEATTLE, WA 98121	91-0586924	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD AFFAIRS COUNCIL - SEATTLE 2200 ALASKAN WAY SUITE 450 SEATTLE, WA 98121	91-0586924	501C3	750		N/A	N/A	IMPLEMENTATION OF POLAND EXCHANGE PROGRAM
WORLD AFFAIRS COUNCIL OF DALLASFORT WORTH PO BOX 220530 DALLAS, TX 79913	74-6081917	501C3	258,386		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD AFFAIRS COUNCIL OF KENTUCKY & SOUTHERN INDIANA NORTHERN KENTUCKY UNIVERSITY NH 311 311 LOUISVILLE, KY 41099	61-1078276	501C3	123,882		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLD AFFAIRS COUNCIL OF KENTUCKY & SOUTHERN INDIANA NORTHERN KENTUCKY UNIVERSITY NH 311 311 LOUISVILLE, KY 41099	61-1078276	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD AFFAIRS COUNCIL OF LAS VEGAS 4830 WEST OQUENDO ROAD LAS VEGAS, NV 89118	37-1456028	501C3	24,247		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLD AFFAIRS COUNCIL OF MAINE C/O UNIVERSITY OF SOUTHERN MAINE 98 BEDFORD STREET PO BOX 9300 PORTLAND, ME 04101	01-0365691	501C3	2,113		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD AFFAIRS COUNCIL OF NEW HAMPSHIRE SOUTHERN NEW HAMPSHIRE UNIVERSITY - FORD HOUSE 2500 NORTH RIVER RD MANCHESTER, NH 03106	02-0239519	501C3	141,240		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLD AFFAIRS COUNCIL OF RHODE ISLAND WORLD AFFAIRS COUNCIL OF RHODE ISLAND 36 WEBSTER AVE WARWICK, RI 02882	05-0260682	501C3	0		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD AFFAIRS COUNCIL OF SOUTH TEXAS 816 CAMARON STREET SUITE NO 215 CORPUS CHRISTI, TX 78212	74-2726236	501C3	5,342		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLD AFFAIRS COUNCIL OF ST LOUIS 30 WEST PERSHING ROAD SUITE 405 ST LOUIS, MO 64108	43-1727811	501C3	48,556		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD PARTNERSHIPS INC 150 W MAXWELL ST ROOM 12 ST PETERSBURG, FL 32501	80-0249546	501C3	276,179		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLD TRADE CENTER INSTITUTE 401 EAST PRATT STREET SUITE 232 BALTIMORE, MD 21202	52-1591820	501C3	357,181		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLDBOSTON PO BOX 4234 BOSTON, MA 62701	04-2281954	501C3	381,850		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLDCHICAGO 309 WEST WASHINGTON STREET SUITE 450 CHICAGO, IL 60606	32-2406639	501C3	309,884		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLDCHICAGO 309 WEST WASHINGTON STREET SUITE 450 CHICAGO, IL 60606	32-2406639	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
WORLDDENVER 3607 MARTIN LUTHER KING JR BLVD DENVER, CO 80205	45-4346778	501C3	6,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLDDENVER 3607 MARTIN LUTHER KING JR BLVD DENVER, CO 80205	45-4346778	501C3	290,169		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM
WORLDMONTANA 1601 N BENTON AVE HELENA, MT 59625	36-3558751	501C3	58,307		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD OREGON 1207 SW BROADWAY SUITE 300 PORTLAND, OR 04104	01-0365691	501C3	3,000		N/A	N/A	IMPLEMENTATION OF THE U.S. PAVILION EXPO 2020 DUBAI PROGRAM
WORLD OREGON 1207 SW BROADWAY SUITE 300 PORTLAND, OR 04104	01-0365691	501C3	197,883		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLDORLANDO (WORLD AFFAIRS COUNCIL OF CENTRAL FLORIDA) 4297 ANDROMEDA LOOP N 202 ORLANDO, FL 32816	59-1837575	501C3	122,312		N/A	N/A	IMPLEMENTATION OF THE INTERNATIONAL VISITORS LEADERSHIP PROGRAM

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" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
GLOBAL TIES US

Employer identification number
52-0848094

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 on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
☐ Travel for companions	☐ Payments for business use of personal residence		
☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on 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	
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 on Line 1a?		2	
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.			
☐ Compensation committee	☐ Written employment contract		
☐ Independent compensation consultant	☐ Compensation survey or study		
☐ Form 990 of other organizations	☒ Approval by the board or compensation committee		
4 During the year, did any person listed on 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?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on 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?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on 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?		6b	No
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	No
8 Were any amounts reported on 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" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

For each individual whose compensation must be reported on 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.

[illegible]

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
PART I, LINE 3	THE BOARD EVALUATES THE CEOS PERFORMANCE AND RECOMMENDS PAY INCREASES.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

GLOBAL TIES US

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.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number

52-0848094

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE CORPORATION SHALL HAVE AN EXECUTIVE COMMITTEE COMPOSED OF THE OFFICERS AND THE IMMEDIATE PAST CHAIR. THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL THE POWERS OF THE BOARD OF DIRECTORS IN THE MANAGEMENT OF THE AFFAIRS OF THE CORPORATION BETWEEN MEETINGS OF THE BOARD OF DIRECTORS. IT SHALL REVIEW THE ANNUAL BUDGET PRIOR TO ITS PRESENTATION TO THE BOARD OF DIRECTORS FOR APPROVAL. A MAJORITY OF THE MEMBERS OF THE EXECUTIVE COMMITTEE SHALL CONSTITUTE A QUORUM FOR THE TRANSACTION OF ALL BUSINESS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	MEMBERSHIP: MEMBERSHIP IN THE CORPORATION, WHETHER VOTING MEMBERS OR AFFILIATE MEMBERS, SHALL ALL BE GROUPS OR ORGANIZATIONS WHOSE AIMS AND PURPOSES ARE IN CONCERT WITH THOSE OF THE CORPORATION. VOTING MEMBERS OF THE CORPORATION SHALL BE MEMBERS OF THE BOARD OF DIRECTORS WHO ARE ELECTED TO HOLD OFFICE AS PROVIDED IN THESE BYLAWS. SUCH VOTING MEMBERS SHALL BE THE SOLE MEMBERS OF THE CORPORATION FOR PURPOSES OF THE DISTRICT OF COLUMBIA NONPROFIT CORPORATION ACT. EX-OFFICIO MEMBERS AND STAFF MEMBERS WHO MEET WITH THE BOARD OF DIRECTORS HAVE NO VOTE IN THE BUSINESS OF THE CORPORATION. SECTION 3. THE CORPORATION SHALL HAVE THE FOLLOWING TYPES OF AFFILIATE MEMBERS: COMMUNITY-BASED MEMBERS, NATIONAL MEMBERS, AND INTERNATIONAL MEMBERS. AFFILIATE MEMBERS SHALL HAVE NO VOTING RIGHTS. (A.) COMMUNITY-BASED MEMBERS. COMMUNITY-BASED MEMBERS ARE GLOBAL HUBS WITHIN THEIR COMMUNITIES, CONNECTING LOCAL GOVERNMENT, NONPROFIT, BUSINESS, AND ACADEMIC PROFESSIONALS WITH THEIR INTERNATIONAL COUNTERPARTS THROUGH INTERNATIONAL EXCHANGE AND OTHER PROGRAMS. (B.) NATIONAL MEMBERS. THE NATIONAL MEMBERS ARE NONPROFITS THAT IMPLEMENT EXCHANGE PROGRAMS ACROSS THE UNITED STATES. NATIONAL MEMBERS WORK CLOSELY WITH COMMUNITY-BASED ORGANIZATIONS IN THE GLOBAL TIES NETWORK TO HELP BUILD A MORE PEACEFUL AND PROSPEROUS WORLD THROUGH EXCHANGE. (C.) INTERNATIONAL MEMBERS. INTERNATIONAL MEMBERS ARE ORGANIZATIONS BASED OUTSIDE THE UNITED STATES THAT SHARE THE CORPORATION'S COMMITMENT TO PROMOTING A MORE PEACEFUL, PROSPEROUS WORLD THROUGH INTERNATIONAL EXCHANGE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE BOARD REVIEWS AND APPROVES THE COMPLETED 990 BEFORE IT IS FILED, BUT IF THE FILING OF THE 990 DOES NOT COINCIDE WITH A SCHEDULED BOARD MEETING, THE FINANCE COMMITTEE WOULD CONVENE A VIRTUAL OR TELEPHONIC MEETING TO REVIEW AND APPROVE 990.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, EACH BOARD DIRECTOR AND SENIOR MANAGEMENT TEAM MEMBER SIGN A STATEMENT WHICH AFFIRMS HE/SHE: 1. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY; 2. HAS READ AND UNDERSTANDS THE POLICY; AND 3. HAS AGREED TO COMPLY WITH THE POLICY. FOR ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE BOARD MEMBER AND SENIOR MANAGEMENT MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND ARE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE BOARD AS WELL AS ITS FEDERAL AWARDDING AGENCY. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT EXISTS. IF THE BOARD OR THE COMMITTEE DECIDES THAT A CONFLICT EXISTS, THE BOARD OR COMMITTEE APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE DETERMINES WHETHER GLOBAL TIES U.S. CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE DETERMINES BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN GLOBAL TIES U.S.'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IT THEN MAKES ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT INFORMS THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORDS THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT TAKES APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION INCLUDING INFORMING THE FEDERAL AWARDDING AGENCY IN WRITING. AS TO THE EMPLOYEES, IF GLOBAL TIES U.S. BECOMES AWARE OF A CONFLICT OF INTEREST THAT AN EMPLOYEE HAS NOT DISCLOSED, THE DIRECTOR OF FINANCE AND OPERATIONS DISCUSSES THE SITUATION WITH THE EMPLOYEE, REQUIRES THAT A WRITTEN DISCLOSURE BE MADE AS PROVIDED IN THE POLICY. VIOLATIONS OF GLOBAL TIES U.S. POLICIES, INCLUDING THE FAILURE TO AVOID A PROHIBITED ACTIVITY OR TO DISCLOSE A CONFLICT OF INTEREST IN A TIMELY MANNER, WILL BE DEALT WITH IN ACCORDANCE WITH APPLICABLE GLOBAL TIES U.S. POLICIES AND PROCEDURES, WHICH MAY INCLUDE DISCIPLINARY ACTIONS UP TO AND INCLUDING TERMINATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE COMMITTEE OF THE BOARD EVALUATES THE CEO'S PERFORMANCE AND RECOMMEND SALARY INCREASES. COMPARABILITY - THE INCREASE IN COMPENSATION REFLECTS A COMBINATION OF THE FEDERAL COLA INCREASE AND A MERIT INCREASE BASED ON THE LEVEL OF PERFORMANCE AS JUDGED BY THE EXEC COMMITTEE. BOARD DISCUSSION AND DOCUMENTATION, THE BOARD CONDUCTS A REVIEW OF THE PRESIDENT'S PERFORMANCE; 100% OF BOARD MEMBERS PARTICIPATED IN THE REVIEW THROUGH A WRITTEN EVALUATION AND A VERBAL DISCUSSION OF THE COLLATED RESULTS AT THE BOARD MEETING. THE EXECUTIVE COMMITTEE DISCUSSES THE OUTCOME OF THE RESULTS AND DETERMINES/APPROVES THE RAISE. THE EXECUTIVE COMPENSATION DOES NOT TAKE FORMAL MINUTES ON THE DELIBERATION, BUT THEY DO HAVE THE EVALUATION RESULTS, THE NOTES FROM THE BOARD DISCUSSION, AND EMAILS DOCUMENTING THE CONVERSATIONS AND DECISION WHICH ARE AVAILABLE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GLOBAL TIES MAKES ITS FEDERAL FORMS 1023 AND 990, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
GLOBAL TIES US

Employer identification number
52-0848094

Part I

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)GLOBAL TIES FOUNDATION 1000 VERMONT AVE NW SUITE WASHINGTON, DC 20005 47-4646787	ADVANCEMENT FOR DIPLOMACY AND CULTURAL, EDUCATIONAL, AND SPORTS PROGRAMS	DC	501(C)(3)	LINE 10	GLOBAL TIES US	Yes	

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

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

Return Reference	Explanation