Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

, 20

Department of the Treasury Internal Revenue Service

For the 2022 calendar year, or tax year beginning

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.

2022, and ending

В	Check	if applicable:	С							D Emplo	yer identi	ication num	ber
	А	ddress change	The Globa	al Clim	bing Init	ciative	Inc.			82-	41336	518	
	N	ame change	2855 Rock			ŧ104				E Teleph	one numb	er	
	In	nitial return	Superior,	CO 80	027								
	Fi	nal return/terminated											
	A	mended return								G Gross	receipts \$	5	65,159.
	HA	pplication pending	F Name and add	lress of princi	oal officer: Cao	++ Dagg	1		H(a) Is this	a group retu			Yes X No
	ш		Same As C	: Above	300	icc rage	21		H(b) Are al	II subordinate ," attach a lis	s included	?	Yes No
<u> </u>	Tax	-exempt status:	X 501(c)(3)	501(c) (nsert no.)	4947(a)(1)	or 527	. It "No,	," attach a lis	it. See inst	ructions.	
J		bsite: N/		33.(3)	/ (**	,	()()		H(c) Group	exemption r	number		
K		n of organization:	X Corporation	Trust	Association	Other	L	Year of format				gal domicile	: CO
	art I	Summar		iiust	7133001411011	Other		rear or format	.011. 202	.0 [Otate of le	gar dominene	
	1	Briefly descri	be the organiza	ation's mis	sion or most s	significant	activities: c	oo Saho	dula 0				
							<u></u> 5	ee 2011e	<u>uute_U</u>				
ည													
Governance													
Ş.	2	Check this bo	ox if the	organizat	ion discontinu	ed its oper	ations or dis	posed of mo	ore than 2	25% of its	net ass	ets.	
ಹ	3		ting members										3
⊸ర ഗ	4		dependent voti										0
ı≞	5		of individuals								5		0
Activities &	6		of volunteers	•							6		0
Ă			ed business rev								7a		0.
	D	net unrelated	d business taxa	ble incom	e irom Form 9	190-1, Part	i, iiie i i					C	0.
	8	Contributions	and grants (P	ort \/III lin	o 1b)					Prior Year		Curre	ent Year
ne	9										-		65,158.
Revenue	9 Program service revenue (Part VIII, line 2g)												1.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)												
	12		e – add lines 8				•						65,159.
	13		imilar amounts										21,772.
	14		to or for mem		-	•	-						
	15	•	er compensation	-	•								13,200.
ses	16a		fundraising fee										13/2001
Expenses	b		sing expenses	-		-			•				
Ω	17		ses (Part IX, co										6,075.
	18		es. Add lines 1			•							41,047.
	19	•	s expenses. Su	-	•						-		
- 0		rtevenue less	expenses. ou	Diract IIIIe	18 HOITI IIIIe	12			_	ing of Curre	nt Voor	End	24,112. of Year
ets or	20	Total assets	(Part X, line 16	5)							248.	Liiu	34,360.
Asse Bala	21		s (Part X, line							10,	0.		0.
Net Ass Fund Bal	22	Net assets or	fund balances	Subtract	line 21 from I	ine 20				10,			34,360.
	rt II	Signatur		. Gubtraot		20			•	10,	240.		34,300.
		_		amined this re	eturn including acc	romnanving so	hedules and stat	ements and to	the hest of r	ny knowleda	e and helie	of it is true	correct and
com	plete. D	eclaration of prepa	eclare that I have ex arer (other than offic	er) is based o	n all information o	f which prepar	er has any know	ledge.	the best of t	ny knomeag	c and bene	., 1015 1146,	sorrect, and
Sig	nr	Signature of	officer						Date				
He	re	Scott	Pagel					F	reside	ent			
		Type or print	t name and title										
-		Print/Type p	oreparer's name		Preparer's sign	nature	_	Date		Check	if F	PTIN	
Pa	id	Tammy	Baumann,	EA	Tammy B	Baumann,	, EA			self-emplo	yed]	200756	453
Pro	epar	er Firm's name		MAS AS	SOCIATES								
Us	e Or	ily Firm's addre		N MAIN						Firm's EIN	61-	12363	65
					N, KY 410	97				Phone no.	(859		-6242
Ma	y the	IRS discuss th	nis return with t	he prepare	er shown abov	e? See ins	structions					X Yes	No

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	3		Х
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		Х
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		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		X
b	Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Х
С	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		Х
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? <i>If "Yes," complete Schedule D, Part IX.</i>	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		Х
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? <i>If</i> "Yes," complete Schedule F, Parts II and IV.	15		Х
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
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		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Χ
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		Х

Form 990 (2022) The Global Climbing Initiative Inc. 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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		Х
	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 a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		Х
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		Х
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		Х
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		Х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
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		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V		V	. [
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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Form 990 (2022) The Global Climbing Initiative Inc.

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

			res	NO
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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		Х
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).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		X
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		Х
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).			
а	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		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	_		37
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		^
•	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		
	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:	36		
	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	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			
	Enter the amount of reserves on hand	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O.</i>	14a 14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	170		
,,	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
Α ^	If "Yes," complete Form 6069. TEEA0105L 09/01/22	F-	000	2000
AΑ	IEEAUTOOL 09/01/22	rorm) DEC 1	2022)

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 No Yes 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 on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Χ Did the organization have members or stockholders?..... 6 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 Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a **b** Each committee with authority to act on behalf of the governing body?..... 8b 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 on Schedule O..... 9 Χ 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 Χ 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?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts?.... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ X **14** Did the organization have a written document retention and destruction policy?..... 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? X a The organization's CEO, Executive Director, or top management official...... 15a **b** Other officers or key employees of the organization..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... 16a 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 16b organization's exempt status with respect to such arrangements?... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records. Scott Pagel 1008 Dayton Ave. Dayton KY 41074 (262) 510-6957

Form 990 (2022)	The	Global	Climbing	Initiative	Tnc

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Page **7**

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(C)						_
(A) Name and title	(B) Average hours per		dir	ector/	ot che unles officer /truste			(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/Î 099- MISC/1099-NEC)	compensation from the organization and related organizations
	line)	()	æ			ated				
(1) Scott Pagel President	$-\frac{15}{0}$	Х						0.	0.	0.
(2) Dani Dobrot	15									
Secretary (3) Ludivine Brunissen	0 5	Х						0.	0.	0.
Treasurer	0	Х						0.	0.	0.
<u>(4)</u>										
<u>(5)</u>										
<u>(6)</u>										
_(8)										
<u>(9)</u>										
<u>(10)</u>										
<u>(11)</u>										
(12)										
(13)										
(14)									_	

Part	VII Section A. Officers, Directors, Tru		Key	En		_	es, a	and	Highest Con	ipensated Emp	loyees	(conti	nued)
		(B)			((•							
	(A)	Average hours	(do	not o	check	more	than	one h an	(D) Reportable	(E) Reportable		(F)	
	Name and title	per week					or/trus	tee)	compensation from	compensation from related organizations		ated amo	
		(list any hours	or d	ilsni	Officer	Key	High	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the o	nsation t rganizati	ion
		for related	dividual director	utio	cer	emp	Highest co employee	ner er				d related anization	
		organiza - tions	E E	nalt		Key employee	e						
		below dotted line)	Individual trustee or director	Institutional trustee		ð	Highest compensated employee						
		illie)		ď			ited						
(15)													
(16)		1											
(17)													
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(21)													
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		1											
1b S	ubtotal								0.	0.			0.
	otal from continuation sheets to Part VII, Secti								0.	0.			0.
	otal (add lines 1b and 1c)								0.	0.			0.
	otal number of individuals (including but not limited	to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	pensatio	า	
	om the organization 0											V	N _a
												Yes	No
3 Di	id the organization list any former officer, direc n line 1a? <i>If "Yes,"complete Schedule J for suc</i>	tor, truste <i>h individu</i>	e, ke ial	ey e	mplo	oyee	e, or	high	nest compensated	employee	. 3		Х
	·												
th	or any individual listed on line 1a, is the sum of le organization and related organizations greate	er than \$1	50,00	00?	If "	Yes,	" con	nple	ete Schedule J for	,	4		37
	uch individual										. 4		Х
5 Di	id any person listed on line 1a receive or accru or services rendered to the organization? <i>If "Ye</i> s	e comper s." comple	ısatıc <i>ete S</i>	n tr che	om <i>dule</i>	any e <i>J f</i> o	unre or su	late ch t	ed organization or Derson	ındıvidual	. 5		Х
Section	on B. Independent Contractors										l		
1 C	omplete this table for your five highest compen ompensation from the organization. Report compen	sated ind	epen	dent	t cor	ntra	ctors	tha	t received more the	nan \$100,000 of	,		
	1 1		lile C	alell	uai .	yeai	enun	ng v	(B)	<u> </u>		C)	
	(A) Name and business add	ress							Description of	of services	Compe	nsatio	n
		,							<u> </u>				
	otal number of independent contractors (including b		ited to	o tho	se I	ısted	abo	ve)	who received more	than			
	100,000 of compensation from the organization	0											

		(2022) The Glo	obal	Clin	nbin	g Initiative	e Inc.		82-4133618	Page 9
Par	t VI	II Statement of I	Rever	nue						_
		Check if Schedule	e O cor	ntains a	a resp	onse or note to any	y line in this Part VI	IL		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
र्घ, रा	1a	Federated campaign	าร		1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b					
ָבָּ בַּ	С	Fundraising events.			1c	9,926.				
ar /	d	Related organization	าร		1d	,				
P, E	е	Government grants (contri	ibutions))	1e					
r Si	f	All other contributions, git	fts, gran	ts, and						
E E		similar amounts not inclu			1f	55,232.				
重ら	g	Noncash contributions inclines 1a-1f			1g					
S E	h	Total. Add lines 1a-		-			65,158.			
						Business Code	03/130:			
핕	2a				Ī					
ě	b									
9	С									
er.	d									
S	е									
gra	f	All other program se	ervice i	revenue	e					
Program Service Revenue	g	Total. Add lines 2a-2	2f							
	3	Investment income (ir	ncludin	g divide	nds, ir	iterest, and				
		other similar amoun	ts)				1.	1.		
	4	Income from investr				· ·				
	5	Royalties								
			_	(i) Re	al	(ii) Personal				
		-	6a							
		·	6b							
		Rental income or (loss)								
	d	Net rental income or	r (loss)							
	7a	Gross amount from		(i) Secur	rities	(ii) Other				
		sales of assets other than inventory	7a							
	b	Less: cost or other basis	_							
		' -	7b			+				
		· · · · ·	7c							
		Net gain or (loss)								
Ř	8a	Gross income from fundra	aising ev	ents						
en		(not including \$	on ling 1	(c)	_					
چَ		See Part IV, line 18		,	8a					
Other Revenue	h	Less: direct expense			8b					
粪		Net income or (loss)								
Q					5ig G					
	уа	Gross income from gamin See Part IV, line 19	y activit	ies.	9a					
		Less: direct expense			9b					
		Net income or (loss)			activ	ities				
	ıua	Gross sales of inventory, returns and allowances.			10a	.				
		Less: cost of goods			1 Ob					
		Net income or (loss)								
S		,				Business Code				
g a	11a									
ž ž	b									
Miscellaneous Revenue	С									
<u>Š</u> %	d	All other revenue		 						
Σ	е	Total. Add lines 11a	-11d.							

65,159

Total revenue. See instructions.....

0.

	t IX Statement of Functional Expens				
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a re				X
Do i 6b, i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	21,772.	21,772.		
4 5	Benefits paid to or for members	13,200.	13,200.	0.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting	145.	145.		
	Lobbying	140.	140.		
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule 0 Sch 0	5,485.	5,485.		
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Donation Transaction Fees	231.	231.		
	Merchandise Shipping Fees	154.	154.		
С	Membership Dues	60.	60.		
d					
-	All other expenses				
	Total functional expenses. Add lines 1 through 24e	41,047.	41,047.	0.	0.
	· ·	11,01,	11,017.	· ·	· ·
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)				

2 Savings and temporary cash investments. 2 3 3 3 3 3 3 3 3 3			Check if Schedule O contains a response or note to any line in this Part X .	<u></u>	<u></u>	
2 Savings and temporary cash investments. 2 3 3 3 3 3 3 3 3 3				(A) Beginning of year		(B) End of year
### Pleedges and grants receivable, net. ### Accounts receivable, net. ### Accounts receivable, net. ### Accounts receivables from 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 ### Accounts receivables from other disqualified persons (as defined under section 4958(n)(1), and persons described in section 4958(c)(3)(B) ### Notes and loans receivable, net ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. ### Notes and loans payable to urrelated third parties. #		1	Cash — non-interest-bearing.	10,248.	1	26,214.
A Accounts receivable, net.		2	Savings and temporary cash investments		2	
5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% contributed entity or family member of any of these persons. 5 Consider the property of any of these persons (as defined under section 4958(n)(1), and persons described in section 4958(n)(3)(8) 7 Notes and loans receivable, net. 8 Inventories for sale or use. 8 Inventories for sale or use. 8 Inventories for sale or use. 9 Prepaid expenses and deferred charges. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 11 Investments – publicity fraded securities. 11 Investments – publicity traded securities. 12 Investments – publicity traded securities. 13 Investments – publicity traded securities. 14 Intangible assets. 15 Other assets. See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 33). 10, 248. 16 34,360. 17 Accounts payable and accrued expenses. 18 Grants payable. 19 Deferred revenue. 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to any current or former officer, director, trustee, expending entity in the payables to any current or former officer, director, trustee, controlled entity or family member or any of these persons. 22 Secured mortgages and notes payable to unrelated third parties. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities. Add lines 17 through 25. 26 Total liabilities. Add lines 17 through 25. 27 Organizations that do not follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 28 Net assets with donor restrictions. 29 Capital stock or trust principal, or current funds. 29 Capital stock or trust princip		3	Pledges and grants receivable, net		3	
controlled entity or family member of any of these persons		4	Accounts receivable, net		4	
10		5	Loans and other receivables from 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	
7 Notes and loans receivable, net.		6	Loans and other receivables from other disqualified persons (as defined under			
8 Inventories for sale or use. 8 8 8 146.		7				
9 Prepaid expenses and deferred charges. 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D. 11b Less: accumulated depreciation. 11 Investments — publicly traded securities. 12 Investments — publicly traded securities. 13 Investments — program-related. See Part IV, line 11. 14 Intangible assets. 15 Other assets. See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 33). 17 Accounts payable and accrued expenses. 17 If Accounts payable and accrued expenses. 17 Accounts payable and accrued expenses. 18 Grants payable 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 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 Loans and other payables to unrelated third parties. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 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. 26 Total liabilities. Add lines 17 through 25. 27 Net assets without donor restrictions. 28 Net assets without donor restrictions. 29 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions. 28 Organizations that follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 31 Retained earnings, endowment, accumulated income, or other funds. 31 Retained earnings, endowment, accumulated income, or other funds. 31 Total net assets or fund balances.	(A)	-				0.146
10a 10b 10c	et				_	8,146.
10a 10b 10c	455	-			9	
11 Investments — publicly traded securities. 11 12 Investments — other securities. See Part IV, line 11. 12 13 Investments — other securities. See Part IV, line 11. 13 13 Investments — program-related. See Part IV, line 11. 13 14 Intangible assets. 14 14 15 15 16 16 16 16 16 16			· · · · · · · · · · · · · · · · · · ·			
12 Investments — other securities. See Part IV, line 11.		b	·		1 1	
13 Investments - program-related. See Part IV, line 11.		11	•			
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28 Net assets with donor restrictions 28	a			10,248.	1	34,360.
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, or equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. Total liabilities and net assets/fund balances. 10,248. 32 34,360.	8	28			28	
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30 Paid-in or capital surplus, or land, building, or equipment fund. 30 31 Retained earnings, endowment, accumulated income, or other funds 31 32 34,360. 33 Total liabilities and net assets/fund balances. 10,248. 33 34,360. 34,360.	ō	29	Capital stock or trust principal, or current funds		29	
31 Retained earnings, endowment, accumulated income, or other funds 31	ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
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Ž 33 Total liabilities and net assets/fund balances. 10,248. 33 34,360.	14 4	32	Total net assets or fund balances	10,248.	32	34,360.
	ž	33	Total liabilities and net assets/fund balances.		33	34,360.

3b

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 on Schedule O and describe any steps taken to undergo such audits

SCHEDULE A (Form 990)

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.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization Employer identification number The Global Climbing Initiative Inc. 82-4133618 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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 Χ 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.) An agricultural research organization described in section 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 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 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 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. 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. 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. **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.** 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. Enter the number of supported organizations **g** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support												
begi	endar year (or fiscal year inning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total												
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					39,803.	39,803.						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.						
	Total. Add lines 1 through 3 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)	0.	0.	0.	0.	39,803.	39,803.						
6	Public support. Subtract line 5 from line 4						39,803.						
Sec	tion B. Total Support												
Cale begi	Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total												
7	Amounts from line 4	0.	0.	0.	0.	39,803.	39,803.						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.						
	Total support. Add lines 7 through 10						39,803.						
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	0.						
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or fi	fth tax year as a	section 501(c)(3)	X						
Sec	tion C. Computation of Pul	olic Support P	ercentage										
14	Public support percentage for 20	22 (line 6, column	n (f), divided by lin	ne 11, column (f)))	14	%						
	Public support percentage from 2					L	%						
16a	33-1/3% support test—2022. If the and stop here. The organization												
b	33-1/3% support test—2021. If th and stop here. The organization												
17a	or more, and if the organization	0%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how e organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization											
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a l-circumstances te	nd-circumstances est. The organizat	test, check this begin in the total test.	oox and stop here publicly supporte	LExplain in Part of organization	VI how the						
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	tructions						

Schedule A (Form 990) 2022

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.)

_	ians to quanty under the te	osis fisted below,	picase complete i	art ii.)				
Sec	tion A. Public Support							
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is							
_	related to the organization's tax-exempt purpose.							
	Gross receipts from activities that are not an unrelated trade or business under section 513.							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.							
С	Add lines 7a and 7b							-1
8	Public support. (Subtract line 7c from line 6.)							
Sec	tion B. Total Support							
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2	(f) Total
	Amounts from line 6	,,	```		, ,	.,,		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First 5 years. If the Form 990 is a organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or t	fifth tax year as a	section 501	c)(3)	
Sec	tion C. Computation of Pul	blic Support P	ercentage					
	Public support percentage for 20			ne 13, column (f))		15	ું ૦,૦
	Public support percentage from 2	•			•		16	%
	tion D. Computation of Inv							
	Investment income percentage for				umn (fl)		17	%
	Investment income percentage for	•		-			18	%
	33-1/3% support tests—2022. If t is not more than 33-1/3%, check	the organization of	did not check the b	oox on line 14, a	nd line 15 is more	than 33-1/3	%, and I	ine 17
b	33-1/3% support tests—2021. If t line 18 is not more than 33-1/3%	he organization d	lid not check a bo	x on line 14 or lin	ne 19a, and line 1	6 is more that	an 33-1/3	3%, and
	THIC TO IS HOLIHOLD CHAIL 33 THE						Ol dal III	.auon

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Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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		
За	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.	3с		
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.	4 a		
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?	5 c		
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? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined on 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 on 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 .	9с		
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)? 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.)	1 0 b		

Par	t IV	Supporting Organizations (continued)			
11	Has t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
		overning body of a supported organization?	11a		<u> </u>
b	A fan	nily member of a person described on line 11a above?	11b		<u> </u>
		5 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		L
Sec	ion l	B. Type I Supporting Organizations			
1	or mo office orgar than were	the governing body, members of the governing body, officers acting in their official capacity, or membership of one one supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported inization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers		Yes	No
2	Did that of benear	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec	tion (C. Type II Supporting Organizations	•		
1	of ea	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1	Yes	No
Sec	ion l	D. All Type III Supporting Organizations			
	orgar year,	the organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	organ	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice all tin	ason of the relationship described on line 2, above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played is regard.	3		
Sect	ion l	E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Т	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	uctions	s).
2	Activi	ities Test. Answer lines 2a and 2b below.		Yes	No
	Did s suppo orgai respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the ordered organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was onsive to those supported organizations, and how the organization determined that these activities constituted translally all of its activities.	2a	. 55	
b	more reaso	the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the cons for the organization's position that its supported organization(s) would have engaged in these activities for the organization's involvement.	2b		
		nt of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	ions			
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
Sec	tion 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				
Sec	tion 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):					
	Average monthly value of securities	1a				
	Average monthly cash balances	1b				
•	Fair market value of other non-exempt-use assets	1c				
	d Total (add lines 1a, 1b, and 1c)	1d				
-	Discount claimed for blockage or other factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 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				
Sec	tion C — Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 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 inte (see instructions).	grated	Type III supporting or	ganization		

BAA Schedule A (Form 990) 2022

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

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 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Line 8 amount divided by line 9 amount		10	
Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7:			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

BAA Schedule A (Form 990) 2022

Part VI

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

Schedule B (Form 990)

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

OMB No. 1545-0047

2022

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

The Global Climbing Initiative Inc. 82-4133618 Organization type (check one): Filers of: Section: X 501(c)(3) Form 990 or 990-EZ (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

The Global Climbing Initiative Inc.

82-4133618

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Marin Community Foundation 5 Hamilton Landing Suite 200 Novato, CA 94949	\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	La Sportiva N.A. Inc. 3850 Frontier Ave. Suite 100 Boulder, CO 80301	\$ <u>8,921.</u>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

The Global Climbing Initiative Inc.

82-4133618

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	Climbing Gear donated to be distributed by GCI.		
		\$ <u>8,921.</u>	10/20/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u></u>		
	L	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u></u>	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	L	 \$ 	
DAA	TEE 007031 07/22/22	Calcadada	D (Farm 000) (2022)

Employer identification number 82-4133618

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)......\$

	Use duplicate copies of Part III if additional	space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
		(e) Transfer of gift	
	Transferee's name, addres		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, addres		Relationship of transferor to transferee
			·
(a) No			T
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(a) Transfer of with	
	Transferee's name, addres	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Taiti			
	(e) Transfer of gift		
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee
	L	LL_	

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The Global Climbing Initiative Inc.

Employer identification number 82-4133618

Form 990, Part I, Line 1 - Organization Mission or Significant Activities

The Global Climbing Initiative equips climbing communties worldwide with the knowledge and resources to thrive. Climbing is in a stage of unprecendented expansion, and it has massive potential to create positive, social and environmental change. We are the bridge connecting emerging climbing communties to the skills, gear, and funds they need to grow safely, inclusively, and sustainably.

Form 990, Part III, Line 1 - Organization Mission

The Global Climbing Initiative equips climbing communties worldwide with the knowledge and resources to thrive. Climbing is in a stage of unprecendented expansion, and it has massive potential to create positive, social and environmental We are the bridge connecting emerging climbing communties to the skills, gear, and funds they need to grow safely, inclusively, and sustainably.

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990. Part VI. Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

Form 990. Part IX. Line 11a **Other Fees For Services**

	(A)	(B) Program	(C) Management	(D) Fund-
<u> </u>	Total	Services	& General	<u>raising</u>
Events Budget Expenditures Executive Coaching	3,130. 719.	3,130. 719.		
Website & Digital Marketing Mg	1,636.	1,636.		
Total 🕏	5,485.	\$ 5,485.	\$ 0.	\$ 0.

Changes to Program Services

GCI's Climbing Leadership Fund was established. This fund selected Prerna Dangi, India's most accomplished female climbing guide to invest in with formal skills Through our first Climbing Leadership Grant, and direct training and certification.

logistical support throughout her journey, we supported Prerna to come to the United States, earn her American Mountain Guide Association Single Pitch Instructor certification, attend a variety of climbing festivals, and build professional connections for her climbing nonprofits in India.

GCI established the Best Practices Project. This project gathers the voices of climbing leaders around the world to shape the future development of our sport through free, translatable resources available to climbers worldwide. In 2022, we worked with over a dozen authors on the development of their chapters on craq development and maintenance, environmental conservation, equity and inclusivity, community engagement, economic impact, and building climbing organizations. chapters reached final stage of production and publication: Working with Vulnerable Communities, Adaptive Raptor Management, and Working with At-Risk Youth.

CGI established the Gear Distribution initiative. In many areas of the world, climbing gear is not just prohibitely expensive-it's often not available for purchase in-country at all. To increase the safety of global climbing communities, our team distributed over \$15000.00 worth of climbing gear to climbing organizations in India, Kenya, Mexico and Brazil, spending only \$685.00 on gear transportation.