** PUBLIC DISCLOSURE COPY **

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service A For the 2012 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Address change YOGA ALLIANCE REGISTRY Name change Doing Business As YOGA ALLIANCE FOUNDATION 94-3079524 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-ated 1701 CLARENDON BOULEVARD 110 (571) 482-3355 Amende 3,383,544. City, town, or post office, state, and ZIP code G Gross receipts \$ Applica-ARLINGTON, VA 22209-2799 H(a) Is this a group return pendina F Name and address of principal officer: RICHARD KARPEL Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? ____Yes ____No I Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list, (see instructions) J Website: ► WWW.YOGAALLIANCE.ORG H(c) Group exemption number Association K Form of organization: X Corporation Trust Other > L Year of formation: 1987 M State of legal domicile: WA Part I Summary Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1. Activities & Governance Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 27 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 9 6 0. 7 a Total unrelated business revenue from Patt VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990·T, line 34 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 0 0. Program service revenue (Part VIII, line 2g) 3,240,493 3,365,246. 6,986 17,940. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 0. 3,247,479 3,383,186. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 1,482,678 1,040,045. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 1,542,707 1,077,007. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,025,385 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,117,052. 222,094 1,266,134. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 2,093,683 3,268,483. Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 343,639 261,088. Net assets or fund balances. Subtract line 21 from line 20 750,044 3,007,395. 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. Lles Signature of officer Sign RICHARD KARPEL. PRESIDENT & CEO Here Type or print name and title P01330558 Preparer's signature Check Print/Type preparer's name Paid Andreas Prleyandrow 52-1392008 Preparer Firm's name GELMAN, ROSENBERG Firm's EIN Firm's address 4550 MONTGOMERY AVE SUITE 650N Use Only

Phone no. (301) 951-9090

May the IRS discuss this return with the preparer shown above? (see instructions)

BETHESDA, MD 20814-2930

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A Х 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or 5 X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Х 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete R X 8 Schedule D, Part III 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? X If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 11d X Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Х Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? Х If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 X 14b or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization Х or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals 16 Х located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 Х 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines Х 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 X complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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Form 990 (2012) YOGA ALLIANCE REGISTRY
Part IV Checklist of Required Schedules (continued)

Lastre	Albani Cinoquia Contractor (Contractor)	1		
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			v
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			.
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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			v
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		v
	Schedule K. If "No", go to line 25	24a		<u> </u>
р	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	04=		
.1	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		.
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	06-		х
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete	OEL		Х
00	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	25b		
26		26		Х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		See	resoles.
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	j., 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L., Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
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			
00	contributions? If "Yes," complete Schedule M	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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
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	X	L
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	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		X
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	X	

Form 990 (2012)

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Dart V	Statements Re	parding Other IRS Filing	s and Tax Compliance
1.4 Tag(CH) (6) V (8)	Otatements ne	garaning Outlot the raining	go ana rax compnance

Series the number reported in Box 3 of Form 1036. Enter 0-if not applicable 16 5 5		Check if Schedule O contains a response to any question in this Part V					
b Enter the number of Forms WGS included in line 1a. Enter 0-fi not applicable 10 0 0 0 0 0 0 0 0						Yes	No
b Enter the number of Forms WGS included in line 1a. Enter 0-fi not applicable 10 0 0 0 0 0 0 0 0	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	5			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gamining) within some with a with a with a within the very ser covered by this return (field for the calendar year ending with or within the year covered by this return (field for the calendar year ending with or within the year covered by this return (field for the calendar year ending with or within the year covered by this return (field for the calendar year ending with or within the year covered by this return (field for the calendar year ending with or within the year covered by this return (field for the calendar year ending with or within the year or the return of the calendar year ending with or within the year of the covered by this return (field for the calendar year ending with the year) (field for the calendar year) (field for the calendar year) (field for the calendar year) (field for the year) (field for year) (fiel		·	1b	0			
Gambling) winnings to prize winners? Enter the number of employees reported on From W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Filed for the calendar year ending with or within the year covered by this return Note, if the sum of lines 1 and 22 is greater than 250, you may be required to e-five filed instructions) Note, if the sum of lines 1 and 22 is greater than 250, you may be required to e-five (as instructions) Note, if the sum of lines 1 and 22 is greater than 250, you may be required to e-five (as instructions) Note, if the sum of lines 1 and 22 is greater than 250, you may be required to e-five (as instructions) Note if the sum of lines 1 and 250 is greater than 250, you may be explained in Schedule O As a family in the calendar year, did the organization file and a park account; securities account, or other financial account? As a family in 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)? See instructions for filing requirements for Form TD F G0/221, Report of Foreign Bank and Financial Accounts. Was the organization and you approximate it was or is a party to a prohibled tax shaller transaction? See instructions for filing requirements for Form TD F G0/221, Report of Foreign Bank and Financial Accounts. Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax edecutibles or form 888617 Organizations that may receive deductible contributions under section 170(a). If If Yee, "did the organization include with every solicitation an express statement that such contributions or grifts worn on tax deductibles as charitable contributions? Organization set that may receive deductible for file year than the section of the properties of the properties			eporta	ble gaming		Edi.	
2a Earth the number of employees reported on Form W.S. Transmittat of Wage and Tax Statements, Ited for the calendary year ending with or within the year covered by this return. 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 2 as is greater than 250, our may be required to e-rise (see Instructions) 3a Icil the organization in leve meristed business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 950-T for this year? If "No," provide an explanation in Schedule O 3b If "Yes," an explanation have vertically vary, did the organization in the schedule O 3c If "Yes," an explanation in a foreign country (such as a bank account, securities account, or other financial account)? 4c If "Yes," the interest han ease of the foreign country. 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 888617 6c If "Yes," to line 5a or 5b, did the organization file Form 888617 6d If "Yes," to line 5a or 5b, did the organization file Form 888617 6d If "Yes," to line 5a or 5b, did the organization file Form 888617 6d If "Yes," to line 5a or 5b, did the organization file Form 888617 6d If "Yes," to line 5a or 5b, did the organization file Form 888617 6d If "Yes," to line 5a or 5b, did the organization file Form 888617 6d If "Yes," to line 5a or 5b, did the organization file Form 888617 6d If "Yes," to line 5a or 5b, did the organization file Form 888617 6d If "Yes," to line organization explanation file Form 888617 6d If "Yes," the organization file Form 888617 6d If "Yes," the orga	_				1c	Х	<u> </u>
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Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-rife (see instructions) 3 Did the organization have unrelated business greas income of \$1,000 or more during the year? 3 As X x y time during the calendar year, cild the organization have an interest in, or a signature or other authority over, a financial accountly? 4 As At any time during the calendar year, cild the organization have an interest in, or a signature or other authority over, a financial accountly are considered to the calendar year, cild the organization have an interest in, or a signature or other authority over, a financial accountly? 4 As A tarry time during the calendar year, cild the organization as bank account, or other financial accountly? 4 As X Yes, "reter the name of the foreign country. ► 5 See instructions for tiling requirements for Form TD = 90.22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles as chariable contributions. 5 If Yes," the different of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles a chariable contributions. 6 By Organization shall may receive deductible contributions under section 170(c). 6 If Yes," indicate the number of Forms \$282 filed during the year and the organization or evided to the payor? 7 Organization shall may receive deductible contributions under section 170(c). 7 If Yes, "indicate the number of Forms \$282 filed during the year 8 If Yes," indicate the number of Forms \$282 filed during the year 9 If Yes," indicate the number of Forms \$282 filed during the year 9 If Yes, "indicate the number of Forms \$282 filed during	b		 rns?		2b	X	
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b If "Yes," has it field a Form 99.0T for this year? If "No," provide an explanation in Schedulo O A ring time during the calendary 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)? B If "Yes," enter the name of the foreign country. Such as a bank account, securities account, or other financial accounts? See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. B Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? See instructions for filing requirements for form that the was or is a party to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T? B 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? B If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If If Yes, "Indicate the number of forms 8282 filed during the year If Yes," indicate the number of forms 8282 filed during the year If Yes," indicate the number of forms 8282 filed during the year If If Yes," indicate the number of forms 8282 filed during the year If If the organization received a contribution of qualified intellectual property, clid the organization file Form 899 as required? If the organization was a contribution of cars, boats, siphanes, or other vehicles, did the organization by a form 1980. The party organization was a contribution of cars, boats, siphanes, or other vehicles, did the organization. By Armany for a distribution to a donor, donor advised funds and seetlen 599(3) apporting organizations. Did the supporti	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
4a At any time during the calendary 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, or other financial account?) See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Sa Was the organization prive to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization prive to prohibited tax shelter transaction at any time during the tax year? 5b If Yes, "to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 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? 6b If Yes, "did the organization include with every solicitation and oxpress statement that such contributions or gifts were not tax deductible? 7 Organizations that may recolve deductible contributions under section 170(c). 8 If If Yes, "did the organization notity the donor of the value of the goods or services provided? 7 Did the organization receive apprent in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 To United the foreign country of the donor of the value of the goods or services provided? 7 Did the organization received any funds, directly or indirectly, to pay promiums on a personal benefit contract? 7 Did the organization received a contribution of qualified intellectual property, did the organization file a form 1098-C? 8 Spensoring organization maintaining donor advised funds and section 509(a)(3) supporting organization file a form 1098-C? 9 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization file a form 1098-C? 10 Section 501(c)(7) organizations. Enter: 10 If Yes, "enter the amount of trax example interval to excess the organization in f					3b		
financial account in a foreign country; such as a bank account, securities account, or other financial account;? b if "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any stable party notify the organization file Form 8886 T? C if "Yes," to line 5a or 5b, did the organization file Form 8886 T? Does the organization have amusit gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? A year of the second			author	ity over, a			
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13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 13a 13a 13a 13b 13b 13c 14a X	12a			ĺ	12a	-	·
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Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	13	Section 501(c)(29) qualified nonprofit health insurance issuers.		*NT / 7\	40-	 	
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 c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	а			177.44	ı3a_		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					'''		
c Enter the amount of reserves on hand	b		401	1		1	
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					1		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	C			<u> </u>	14-	 	v
b it "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0						 	<u> </u>
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	i o O			990	/2012\

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	Check if Schedule O contains a response to any question in this Part VI	*********		X
ect	ion A. Governing Body and Management		V	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1a9			Alvyot I
	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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			\$10.00
	officer, director, trustee, or key employee?	2		X
	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		7,5
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	Jan 194		
	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	d8	X	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
3	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
<u> </u>	NOTE DE L'ORIGINATION DE L'AUTONNE L		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
ນ	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
44-	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	Х	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- · ·		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	7-1-		
	in Schedule O how this was done	12c	Х	
		13	X	
13	Did the organization have a written whistleblower policy?	14		Х
14	Did the organization have a written document retention and destruction policy?	17		-
15	Did the process for determining compensation of the following persons include a review and approval by independent			1 12
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	х	
	The organization's CEO, Executive Director, or top management official		22	Х
b	Other officers or key employees of the organization	15b		- 25
	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	40.		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	ĺ		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	1 .		
	exempt status with respect to such arrangements?	16b		,
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only)	availal	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X 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, ar	nd fina	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ation:)	-	
	RICHARD KARPEL - (571) 482-3355 1701 CLARENDON BOULEVARD, SUITE 110, ARLINGTON, VA 22209-2799		_	

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Form 990 (2012)

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	nor any related	orga					ısat	ed any current officer, c		
(A)	(B)			((Pos	<u>(S</u>			(D)	(E)	(F)
Name and Title	Average	ído	not c	heck	more	than -	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an tee)	compensation	compensation	amount of
	week		Der al	uau	1 601	31711 (48	100)	from	from related	other
	(list any	irecto			ŀ			the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for related	20.0	32			sated		(W-2/1099-MISC)	(44-27 1099-141100)	organization
	organizations	laste	l trus		8	mpen		(44-27 1033-141100)		and related
	below	t lang	tiona	L	율	St Si	<u></u>			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key er	Highest compensated employee	Former			
(1) BRANDON HARTSELL	15.00									
CHAIR		Х	ļ	X	ļ	<u> </u>		0.	0.	0
(2) LINDA ROWE	2.00								^	_
VICE CHAIR & TREASURER		X	<u> </u>	Х	ļ		<u> </u>	0.	0.	0
(3) LYNN BUSHNELL	2.00	l								
SECRETARY		Х	<u> </u>	Х	<u> </u>		ļ.—	0.	0.	0
(4) MARGIE DEUTSCH LASH	2.00	 	1		1			0.	0.	0
DIRECTOR	2.00	Х	┢╌	\vdash	┝			0.	0.	0
(5) ARUN TILAK	2.00	x						0.	0.	0
DIRECTOR	2.00	┝≏	\vdash		┼─	-		0.		· · · · · · · · ·
(6) GYANDEV MCCORD	2.00	X						0.	0.	0
DIRECTOR (7) ROGER RIPPY	2.00		<u> </u>	 	┢┈	-				
(7) ROGER RIPPY DIRECTOR	2.00	X						0.	0.	0
(8) ANDREW TANNER	2.00		\vdash							
DIRECTOR		X		ļ	<u> </u>		L.	0.	0.	0
(9) VIRGINIA COWEN	2.00				ļ					_
DIRECTOR		X			Ц.	ļ		0.	0.	0
(10) RICHARD KARPEL	40.00									
PRESIDENT & CEO (BEGINNING 07/12)			ļ	X	ļ	ļ.		78,365.	0.	6,656
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Form 990 (2012)

Par	t VII Section A. Officers, Directors, True	stees, Key Em	ploy	rees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)	
	(A)	(B)			((C)			(D)	(E)	(F)
	Name and title	Average	(40		Pos		1 than	Δn a	Reportable	Reportable	Estimated
		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	· amount of
		week		cer ar	ıdad T	lirecto	or/trus	tee)	from	from related	other
		(list any	ndividual trustee or director						the	organizations	compensation
		hours for	불	یا			ted		organization	(W-2/1099-MISC)	from the
		related	翼	laste) Sil		(W-2/1099-MISC)	•	organization
		organizations	量量	nat		loyee	00 es				and related
		below	iši	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Former			organizations
		line)	볼	SEI.	Į₿	ž.	돌	훈			
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		<u> </u>	<u>L</u>		L.	l					
1b	Sub-total								78,365.	0	
C	Total from continuation sheets to Part V	/II, Section A							0.	0	
d	Total (add lines 1b and 1c)								78,365.	0	<u>. 6,656.</u>
2	Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) wł	no r	eceived more than \$100	,000 of reportable	
_	compensation from the organization						•				0
	Componential with the cyganization.										Yes No
^	Did the organization list any former officer	director or tru	icto	o ka	N/ Or	mnla	woo	or	highest compensated a	mnlovee on	
3											з х
	line 1a? If "Yes," complete Schedule J for										· 3 A
4	For any individual listed on line 1a, is the s										
	and related organizations greater than \$15										4 X
5	Did any person listed on line 1a receive or										
	rendered to the organization? If "Yes," cor	nplete Schedul	le J	for s	uch	pers	son .				. 5 X
Sec	tion B. Independent Contractors										
1	Complete this table for your five highest co	ompensated in	dep	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of compe	nsation from
•	the organization. Report compensation for										
	(A)	and described y							(B)		(C)
	رم) Name and busines:	s address							Description of s	ervices	Compensation
			- . .	r m	_				· · · · · · · · · · · · · · · · · · ·		
	LLSBURY WINTHROP SHAW				~ ^ ·	Λ .	-7		TEGAT GEOTTA	- D.C	150 101
23	00 N STREET N.W., WASH	INGTON,	יע	<u> </u>	<u> 40</u> 1	U 3	/		LEGAL SERVIC	ES	<u> 158,181.</u>
			_								
											·
									d =	aug than	n
2	Total number of independent contractors		iot li	mite	a to	tho	se li: 4	stec	a above) who received in	1018 tria[1	
	\$100,000 of compensation from the organ	nization 🕨					<u>T </u>		· · · · · · · · · · · · · · · · · · ·	l	
											Form 990 (2012)

		Check if Schedule O contain	ns a response t	o any question i	(A)	l (B)	(C) Unrelated	(D) Revenue excluded
					Total revenue	Related or exempt function revenue	business revenue	from tax under sections 512, 513, or 514
ស្ស	1 a	Federated campaigns	1a		u je serbije sa jegob	Haran Sanciada		
E	b							
اع يّ		- destata a constata						
L Y	ب C							
<u> </u>	d							
Siz	e f		· —					
er tr	ı	similar amounts not included above						GANGER CONTRACTOR AND AND ARE
물리								
Contributions, Gifts, Grants and Other Similar Amounts	g	Total, Add lines 1a-1f						Andreas Sandrak (1987)
<u> </u>		Total, Add into ta 11		Business Code	Lizi i Gir ne sezaliti 2061.53		Ligion de Augulio d	
a)	2 a	REGISTRY REVENUE			3,269,041	.3,269,041.		
Š.	Z a	COMPEDENCE		900099	80,500	. 80,500.		
اج <u>چ</u>	C	CDECTAL DIVIDADI	IE	900099	15,705	. 15,705.		
E S	d							
PER	4							
Program Service Revenue		All other program service reven	ue					
	ď	Total. Add lines 2a-2f			3,365,246			
	3	Investment income (including d						
		other similar amounts)			18,298	•		18,298.
	4	Income from investment of tax-						
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<u></u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	·		:			
	b	Less: cost or other basis						
		and sales expenses		358.	ļ	·		
	С	Gain or (loss)		-358.				00
	d	Net gain or (loss)	,,	<u> </u>	-358	•		-358.
<u>o</u>	8 a	Gross income from fundraising	events (not					
nue		including \$	of					,
ě		contributions reported on line 1	lc). See					
Other Revenu		Part IV, line 18						
ŧ		Less: direct expenses		L				
_		: Net income or (loss) from fundr		<u></u>	<u> </u>	- 1 · · · · · · · · · · · · · · · · · ·		
	9 a	Gross income from gaming act						
		Part IV, line 19			-	1		
		Less: direct expenses			1			
		: Net income or (loss) from gami		<u>P</u>				
	10 a	Gross sales of inventory, less r			-		·	
	1	and allowances					-	
	1	Less: cost of goods sold		·	-{			
	c	Net income or (loss) from sales		1				
	<u></u>	Miscellaneous Revenue		Business Code	1			
	11 a							
	l k						<u> </u>	
	'						<u> </u>	
	'	d All other revenuee Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			3,383.186	3,365,246	. 0.	17,940.
	114	iotal revenue, one menucione.						5 000 (0040)

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	on 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a response	e to any question in this	Part IX	(C)	LJ
Do n 7b, 8	ot include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22			<u>sa Pu, da Makara (di Afrika Salia) (di Mi</u> Salia (di Makara (di Afrika Salia) (di Mi	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				ale de la compaña de la co
	Benefits paid to or for members				
5	Compensation of current officers, directors,	05 001	62 016	22,105.	
	trustees, and key employees	85,021.	62,916.	22,103.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	E 140	E 27 010	208,138.	.
7	Other salaries and wages	735,148.	527,010.	400,130	
8	Pension plan accruals and contributions (include	01 406	15,343.	6,063.	
	section 401(k) and 403(b) employer contributions)	21,406.		33,573.	
9	Other employee benefits	119,180.	85,607. 57,026.	22,264.	
10	Payroll taxes	79,290.	57,026.	22,204.	
11	Fees for services (non-employees):				
a	Management	110 100		110,120.	
b	Legal	110,120.		33,438.	
C	Accounting	33,438.		33,436.	
d	Lobbying		ugier e grand geerin		
е	Professional fundraising services. See Part IV, line 17		and the state of t		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	44 064	22 402	22,482.	
	column (A) amount, list line 11g expenses on Sch O.)	44,964.	22,482. 12,213.		
12	Advertising and promotion	12,213.		7,245.	
13	Office expenses	144,909.	137,664.	6,780.	· · · · · · · · · · · · · · · · · · ·
14	Information technology	135,609.	128,829.	0,700.	
15	Royalties	146 500	120 102	7,325.	
16	Occupancy	146,508.	139,183.	1,591.	
17	Travel	31,825.	30,234.	1,391.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	156 540	176,542.	<u> </u>	
19	Conferences, conventions, and meetings	176,542.	1,337.	70.	
20	Interest	1,407.	1,337.	70.	
21	Payments to affiliates	226 205	214,781.	11,304.	
22	Depreciation, depletion, and amortization	226,085.	214,701.	6,854.	
23	Insurance	6,854.		0,004.	
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.) DUES AND SUBS.	3,265.	162.	3,103.	
a		2,773.	2,773.		
b	TEMPORARY HELP REGISTRATION FEES	443.		443.	
C		52.		52.	
d	LICENSES & PERMITS	<u> </u>		†	
е		2,117,052.	1,614,102.	502,950.	0
25_	Total functional expenses. Add lines 1 through 24e	4,111,UJ4.	<u> </u>	302,300	
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)			<u> </u>	Form 990 (201)

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Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) End of year Beginning of year 496,236. 467,128. 1 Cash · non-interest-bearing 1 661,394. 658,236. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 102,471. 7 Notes and loans receivable, net 7 8 Inventories for sale or use _____ 93,963. 82,393. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 1,082,423 basis. Complete Part VI of Schedule D ______ 10a <u>457,426.</u> 624,997. 682,307. 10c b Less: accumulated depreciation 10b 1,102,092. 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 354,901. 203,619 15 Other assets. See Part IV, line 11 15 3,268,483. 2,093,683 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 162,254. 233,403. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 825. 3,070. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 iabilities Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of <u>98,009.</u> <u> 107,166.</u> 25 Schedule D 261,088. 343,639. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 3,007,395. 1,750,044. 27 Unrestricted net assets _____ 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ L and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 1,750,044. 3,007,395. 33 Total net assets or fund balances 33 3,268,483. 2,093,683. 34 Total liabilities and net assets/fund balances Form 990 (2012)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public

Name of the organization

Employer identification number

14,110	,,,	YOGA AT	LIANCE REGIS	TRY					94	4-3079524
Part I	Reason f	or Public Chari	ty Status (All organiza	ations mus	t complete	this part.) See insti	ructions.		
The organi	zation is not a	private foundation I	pecause it is: (For lines 1	through 1	1, check o	nly one be	ox.)			
1 🔲	A church, con	vention of churches	s, or association of churc	hes descr	ibed in se c	ction 170(b)(1)(A)(i).			
2			0(b)(1)(A)(ii). (Attach Sch		•					
з 🗀	A hospital or a	a cooperative hospit	tal service organization d	lescribed i	n section	170(b)(1)(A)(iii).			
4	A medical res	earch organization o	pperated in conjunction v	with a hosp	oital descri	ibed in se	ction 170((b)(1)(A)(iii). Enter t	he hospital's name,
	city, and state) :								
5 🗀	An organization	on operated for the	benefit of a college or un	iversity ow	vned or op	erated by	a governn	nental unit	describe	ed in
		b)(1)(A)(iv). (Comple								
6 🔲	A federal, stat	te, or local governme	ent or governmental unit	described	l in sectio	n 170(b)(1)(A)(v).			
7	An organization	on that normally rec	eives a substantial part o	of its suppo	ort from a	governme	ntal unit o	r from the	general į	public described in
		o)(1)(A)(vi). (Comple								
8 🗔	A community	trust described in s	ection 170(b)(1)(A)(vi). (Complete	Part II.)					
9 X	An organization	on that normally rec	eives: (1) more than 33 1	/3% of its	support fr	om contril	outions, m	embership) fees, ar	nd gross receipts from
	activities relat	ted to its exempt fur	nctions · subject to certa	in exception	ons, and (2	?) no more	than 33 1	/3% of its	support	trom gross investment
			axable income (less sect	ion 511 ta	x) from bus	sinesses a	cquired by	y tne orgai	nization a	aπer June 30, 1975.
	See section (509(a)(2), (Complete	Part III.)				- F00/-1/4			
10	An organization	on organized and or	perated exclusively to tes	st for publi	c satety. S	ee sectio	n 509(a)(4 setions of	or to corn	out the	nurnoses of one or
11 📖	An organization	on organized and or	perated exclusively for th	e benetit c	or, to perio	nii tiie tui n EOO(a)(3) See see	tion 500/s	1/2) Ch	eck the hox that
			ations described in section				, oee sec	tion sosts	aj(O). On	COR THO DOX THAT
			organization and comple	/pe III - Fur	netionally i	ntegrated	d	Type	e III - Nor	n-functionally integrated
е 🗀	a Type I	را لــــا 0 this how I contify tha	at the organization is not							
e []	foundation m	anagers and other t	han one or more publicly	/ supporte	d organiza	tions desc	ribed in s	ection 509	}(a)(1) or	section 509(a)(2).
f	If the organiz	ation received a writ	ten determination from t	he IRS tha	ıt it is a Ty	pe I, Type	II, or Type	e 111		
'		ganization, check th		-						
g	Since August	17, 2006, has the o	organization accepted ar	y gift or co	ontribution	from any	of the follo	owing pers	ons?	
a	(i) A persor	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons d	escribed i	in (ii) and (i	ii) below	, Yes No
	the gove	erning body of the s	upported organization?							11g(i)
			n described in (i) above?							
	(iii) A 35% o	controlled entity of a	person described in (i) o	or (ii) above	∍?					11g(iii)
h	Provide the fo	ollowing information	about the supported or	ganization	(s).					
				·				T		
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Did you	notify the	(vi) ls organizațio	the on in cal.	(vii) Amount of monetary
	anization		14000,1000 011 111100 1	in col. (i) lis	sted in your document?	organizat		(i) organiz	ed in the	support
			above or IRC section (see instructions))	governing	No			ļ- —	·	
			,,	Yes	No	Yes	No	Yes	No	
	·		<u> </u>	ļ	 	<u> </u>		-		
						İ				
						<u></u>	 	 	 	
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	<u>· · · · · · · · · · · · · · · · · · · </u>						1 7			
Total						l]		
	Paperwork Re	eduction Act Notice	e, see the Instructions t	or				Schedul	e A (For	m 990 or 990-EZ) 201
			•							

232021 12-04-12

Form 990 or 990-EZ.

Scriedule A (FUITH 330 OF 330 EZ) ZOTZ		-	==	<i>.</i>		/ = 1 // T		7 5	A11.	1/41	745	7.3
7 - 52 - 52 - 52 - 52 - 52 - 52 - 52 - 5	Cupport Cohodula for (Organizations Described in Section	c 1	70	(h)	(1)	ΙΔΝΙΝ	and	1/	uir	יראננ	IA	(VI)
i Part III	Support Scriedule for v	Jigariizations bescribed in ecotion	٠.		(~,	/ · / ·	6. 38. ₂ 3			- 4	,, ,	A - 3	,
\$20,000,000,000,000	• •	-											

(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						
ale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and						
-	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf					, <u>.</u> .	
3	The value of services or facilities						
	furnished by a governmental unit to						•
	the organization without charge						<u></u>
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly	-4-012 -44	rira: Graetie				
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		am greenalise				
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support	, <u> </u>			T		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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						4
	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 IV.)						·
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	, etc. (see instructi	ions)			12	
13							
	organization, check this box and sto	o here	rcentage		***************************************	***************************************	
26	ction C. Computation of Pub	iic aubhoir Le	i de illage		·_	14	%
	Public support percentage for 2012					15	%
15	Public support percentage from 201 a 33 1/3% support test - 2012. If the	i Schedule A, Part	II, IIII0 14	n line 12 and line	1/1 ie 33 1/3% or r		
16	stop here. The organization qualifies	organization diu ne	ot check the box o	n mie 10, and mie	141300 17070 011	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	▶ □
	stop here. The organization qualifies 33 1/3% support test - 2011. If the	as a publicly supp example of a	ot check a boy on	line 13 or 16a and	d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qua	organization did ni lifica co a publicly	supported organiz	ation		0 01 1110/0, 01/0011 1	▶□
	and stop here. The organization qua a 10% -facts-and-circumstances tes	illies as a publicly	supported organiz	chack a boy on lin	ne 13 16a or 16b.	and line 14 is 10%	or more.
17	a 10% -facts-and-circumstances tes and if the organization meets the "fa	st - 20 (2, ii tile Of(yanızanını ulu nüti 2008'' test obsolut	his hox and eton	here. Explain in Pa	ert IV how the organ	nization
	and if the organization meets the "rameets the "facts and circumstances"	toot The event	ation qualifies as a	nuhlirly sunnorts	ed organization	,,oo organ	▶
	meets the "facts-and-circumstances b 10% -facts-and-circumstances tes	test. The Olyaniza	anon quann c e as a ranization did not	check a hov on lin	ne 13, 16a, 16b, or	17a. and line 15 is	10% or
	b 10% -facts-and-circumstances tes more, and if the organization meets t	ho "facte and aire	imetancee" test o	heck this hox and	stop here. Explai	n in Part IV how the	•
	more, and if the organization meets to organization meets the "facts-and-cir	ne lactoraliurcifct	The organization	qualifies as a pub	licly supported ora	anization	▶□
	Private foundation. If the organization	ournstances test. on did not chack s	hox on line 13-16	gaamoo ao a pao 8a. 16b. 17a. or 17	b. check this box	and see instruction	s
18	Private roundation, it the organization	on did not oneck a	LOS OF MIO TO, TO		Sch	edule A (Form 990	or 990-EZ) 2012
						•	-

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

quality under the tests listed be	low, please comple	ete i ait nij				
Section A. Public Support	(-) 0000	(h) 2000	(a) 2010	(d) 2011	(e) 2012	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(0) 2011	(e) 2012	117.540
1 Gifts, grants, contributions, and						
membership fees received. (Do not	010					812.
include any "unusual grants.")	812.					
Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,760,260.	1,915,194.	2,368,653.	3,240,493.	3,365,246.	12,649,846.
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization'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	1,761,072.	1,915,194.	2,368,653.	3,240,493.	3,365,246.	12,650,658.
7a Amounts included on lines 1, 2, and						•
3 received from disqualified persons						0.
Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the		:	.:			0.
amount on line 13 for the year						0.
						12 650 658
8 Public support (Subtractline 7c from line 6.) Section B. Total Support	<u> </u>		<u> </u>			
	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Calendar year (or fiscal year beginning in)	1,761,072.	1,915,194,	2,368,653.	3,240,493.	3,365,246.	12,650,658.
9 Amounts from line 6		1,913,134,	2,300,033.	<u> </u>		
dividends, payments received on securities loans, rents, royalties and income from similar sources	28,384.	5,308.	3,400.	6,986.	18,298.	62,376.
b Unrelated business taxable income		 -			ļ	
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b	28,384.	5,308.	3,400.	6,986.	18,298.	62,376.
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 IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)	1,789,456.	1,920,502.	2,372,053,	3,247,479		
14 First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organi	zation,
check this box and stop here		,				<u></u> ▶└
Section C. Computation of Publ	ic Support Pe	rcentage				
15 Public support percentage for 2012 (I	line 8, column (f) d	ivided by line 13,	column (f))		15	99.51 %
16 Public support percentage from 2011	Schedule A, Part	III, line 15			16	99.31 %
Section D. Computation of Inves	stment Incom	e Percentage				
17 Investment income percentage for 20	12 (line 10c, colur	nn (f) divided by li	ne 13, column (f))		17	.49 %
49 Investment income percentage from t	2011 Schedule A.	Part III. line 17			18	.69 %
19a 33 1/3% support tests - 2012. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3% , and line	17 is not
more than 33 1/3%, check this box a	and stop here. The	organization qua	lifies as a publicly	supported organi	zation	▶ [X]
b 33 1/3% support tests - 2011. If the	organization did r	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, che	eck this hox and e	top here. The ora	anization qualifies	as a publicly supp	oorted organization	ւ ▶□
20 Private foundation. If the organization	on did not check a	box on line 14 19	a. or 19b. check t	this box and see in	structions	
	AT GIG TIOL OFFICE &	207 011 1110 1111 10		Sc	hedule A (Form 9	90 or 990-EZ) 201
232023 12-04-12			15		•	

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. See separate instructions.

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

 Section 501(c)(4), (5), or (6) organizati 	ons: Complete Part III.			1
Name of organization			Emp	loyer identification number
YOGA ALI	LIANCE REGISTRY		507	94-3079524
Part I-A Complete if the orga	anization is exempt unc	ler section 501(c	or is a section 527 (organization.
Provide a description of the organiza Political expenditures Volunteer hours	***************************************	***************************************	> {	
Part I-B Complete if the org	anization is exempt und	er section 501(c)(3).	
1 Enter the amount of any excise tax i	ncurred by the organization un-	der section 4955	>	B
2 Enter the amount of any excise tax i	ncurred by organization manag	ers under section 495	5	\$ <u></u>
3 If the organization incurred a section	4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				
b If "Yes," describe in Part IV.			\	(-)(2)
Part I-C Complete if the org	anization is exempt und	ter section 501(c), except section but	(6)(3).
1 Enter the amount directly expended	by the filing organization for se	ection 527 exempt fun	ction activities	
2 Enter the amount of the filing organi	zation's funds contributed to o	ther organizations for	section 527	↑
exempt function activities				\$
3 Total exempt function expenditures. line 17b	Add lines 1 and 2. Enter here	and on Form 1120-PO	L, . b .	\$
a management of the contract o	4400 DOL for this year?			Yes No
	nlover identification number (F	IN) of all section 527 r	political organizations to whi	
made nayments. For each organizat	ion listed, enter the amount pa	id from the filing orgar	nization's funds. Also enter t	the amount of political
contributions received that were pro-	mptly and directly delivered to	a separate political or	ganization, such as a separ	ate segregated fund or a
political action committee (PAC). If a	additional space is needed, pro	vide information in Pa	rt IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	contributions received and
		1		
j				

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990 EZ) 2012 YOGA ALLIANCE REGISTRY 94-307952
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)).

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 filling 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)(6).		Am	ount
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)(6).			
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)(6).			
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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 filling 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 50 501(c)(6).			
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)(6).			
p 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 50 501(c)(6).			
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 50 501(c)(6).			
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 filling 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)(6).			
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)(6).			
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)(6).)1(c)(5), or s		
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 50 501(c)(6).)1(c)(5), or s		
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 50 501(c)(6).)1(c)(5), or s		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6).)1(c)(5), or s		
501(c)(6).	, i (c)(c), or s	ection	
		ection	
We want to the title all (000) as marked duce received pendeductible by members?		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? Part III-B Complete if the organization is exempt under section 501(c)(4), section 50	3		<u> </u>
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members			
and the state of t			
expenses for which the section 527(f) tax was paid).			
a Current year	22		
b Carryover from last year			
c Total			
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	al l	-	
expenditure next year?			
5 Taxable amount of lobbying and political expenditures (see instructions)	<u></u> 5	_	
Part IV Supplemental Information			

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. QMB No. 1545-0047
2012
Open to Public Inspection

Name of the organization

YOGA ALLIANCE REGISTRY

Employer identification number 94-3079524

Par		Funds or Other Similar Fund	is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		# Funds and other accounts
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ing that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's ex-	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advi	sors in writing that grant funds can b	oe used only
	for charitable purposes and not for the benefit of the donor or d	onor advisor, or for any other purpos	se conferring
	impermissible private benefit?		Yes No
Par			, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or edu	· —	nistorically important land area
	Protection of natural habitat	Preservation of a co	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	I conservation contribution in the for	m of a conservation easement on the last
	day of the tax year.	•	
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic struc-	ture included in (a)	2c
d	Number of conservation easements included in (c) acquired after	er 8/17/06, and not on a historic stru	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	sed, extinguished, or terminated by	the organization during the tax
	year >		
4	Number of states where property subject to conservation ease	ment is located	-
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it h	olds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, ar	d enforcing conservation easements	s during the year
7	Amount of expenses incurred in monitoring, inspecting, and en	forcing conservation easements duri	ng the year > \$
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	easements in its revenue and exper	nse statement, and balance sneet, and
	include, if applicable, the text of the footnote to the organizatio	n's financial statements that describ	es the organization's accounting for
	conservation easements.	N. I. I. C. Lawie al Tres courses on	Other Similar Assets
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Sillilai Assets.
	Complete if the organization answered "Yes" to Form 99	30, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue sta	tement and balance sneet works of air,
	historical treasures, or other similar assets held for public exhib		erance of public service, provide, in Fait Air,
	the text of the footnote to its financial statements that describe	es these items.	. II I
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statem	ent and balance sheet works of art, filstorical
	treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of	public service, provide the following amounts
	relating to these items:	•	
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical treas		icial gain, provide
	the following amounts required to be reported under SFAS 116	(ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		> \$

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

1.	(a) Description of liability	(b) Book value
(1) Federal incom	e taxes	
(2) DEFERRE	D RENT LIABILITY	84,306.
(3) CAPITAL	LEASE	13,703.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) mus	st equal Form 990, Part X, col. (B) line 25.)	▶ 98,009.

^{2.} FIN 48 (ASC 740) Footnote. 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

Schedule D (Form 990) 2012 YOGA ALLIANCE REGISTRY 94-30/9524 Part XIII Supplemental Information (continued)	4 Page 5
GENERALLY FOR THREE YEARS AFTER IT IS FILED.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
LOSS ON DISPOSAL OF ASSETS SHOWN AS EXPENSE ON THE	358.
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990,	
PART VIII, LINE 7D.	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
LOSS ON DISPOSAL OF ASSETS SHOWN AS EXPENSE ON THE	358.
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990,	•
PART VIII, LINE 7D.	
	·····
	
	
	·

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

YOGA ALLIANCE REGISTRY

Employer identification number 94-3079524

SECTION B, LINE 11: THE FORM 990 WAS PREPARED BY THE FORM 990, PART VI, OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE BOARD RECEIVED A COPY OF THE FORM 990 SEVERAL DAYS BEFORE IT WAS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS ARE ASKED TO SIGN A CONSENT FORM INDICATING THAT THEY WILL NOT ENGAGE IN ACTIONS THAT MAY CONSTITUTE AN ACTUAL, APPARENT, OR POTENTIAL CONFLICT OF INTEREST WITH THE MISSION AND ACTIVITIES OF THE YOGA ALLIANCE REGISTRY, AND WILL DISCLOSE TO THE BOARD OF DIRECTORS, ON THE PRESCRIBED FORM AND PERIODICALLY AS FACTS ANY SUCH CONFLICTS OF INTEREST AND ANY BUSINESS, FINANCIAL, AND DICTATE, ORGANIZATIONAL INTERESTS AND AFFILIATIONS THAT ARE OR COULD BE CONSTRUED TO BE A CONFLICT OF INTEREST. IN THE EVENT THAT A CONFLICT OF INTEREST ARISES THE BOARD CONSIDERS THE MATTER, WITH THE BOARD MEMBER WITH THE POTENTIAL CONFLICT OF INTEREST RECUSING HIMSELF FROM THE MATTER.

WHEN EMPLOYEES WISH TO SERVE ON BOARDS, COMMISSIONS, OR IN OTHER OUTSIDE ACTIVITIES THAT ARE IN THE PUBLIC INTEREST, THEY MUST FIRST CONFIRM WITH THE PRESIDENT THAT THE VOLUNTARY SERVICE IS APPROPRIATE AND DOES NOT PRESENT A CONFLICT OF INTEREST WITH THEIR WORK FOR YOGA ALLIANCE REGISTRY. YOGA ALLIANCE REGISTRY REQUIRES EMPLOYEES TO REVIEW THE EMPLOYEE PERSONNEL HANDBOOK AT THE BEGINNING OF EMPLOYMENT AND EACH YEAR AFTER THE ORGANIZATION MAINTAINS A RECORD OF EMPLOYEES CONFIRMING THAT THEY HAVE RECEIVED AND REVIEWED THE HANDBOOK ANNUALLY. IF A CONFLICT OF INTEREST ARISES, YOGA ALLIANCE REGISTRY INTERVIEWS THE EMPLOYEE IN QUESTION TO REVIEW THE POSSIBLE CONFLICT. IF IT WAS DETERMINED THAT THE EMPLOYEE HAD A THEY WOULD BE ASKED TO CEASE THE ACTIVITY GENUINE CONFLICT OF INTEREST,

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

Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization YOGA ALLIANCE REGISTRY	94-3079524
IMMEDIATELY IN ORDER TO CONTINUE WITH EMPLOYMENT.	
OOO DIDE UT GEGETON D. LINE 153. ONE OF EUE DOLEC	OR MUR RYRCIMIVE
FORM 990, PART VI, SECTION B, LINE 15A: ONE OF THE ROLES	
COMMITTEE OF THE BOARD OF DIRECTORS (BOD) IS TO REVIEW TH	E PERFORMANCE OF
THE PRESIDENT AND DETERMINE COMPENSATION ON AN ANNUAL BAS	IS. THE BOD
DISCUSSES COMPENSATION WITH OUTSIDE COUNSEL AND PURCHASES	DATA THAT
COMPARES COMPENSATION FOR ASSOCIATION AND MEMBERSHIP EXEC	UTIVES. DATA IS
VERY DETAILED AND BREAKS THE INFORMATION DOWN WITH REGARD	TO THE
ORGANIZATION'S ANNUAL BUDGET, NUMBER OF EMPLOYEES, YEARS	IN POSITION AND
GEOGRAPHIC LOCATION. INFORMATION IS SHARED AND REVIEWED W	ITH THE EXECUTIVE
COMMITTEE. THE ORGANIZATION HIRED A NEW PRESIDENT IN JULY	2012.
FORM 990, PART VI, SECTION C, LINE 19: YOGA ALLIANCE REGI	STRY PROVIDES
DOCUMENTS UPON REQUEST.	
FORM 990, PART VI, SECTION B, LINE 14:	
THE ORGANIZATION DOES NOT HAVE A DOCUMENT RETENTION AND I	DESTRUCTION
POLICY. SENIOR MANAGEMENT INTENDS TO IMPLEMENT A POLICY I	
FISCAL YEAR.	
I IDCAL I IIA.	
	<u> </u>

Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990.

➤ See separate instructions.

2012 Open to Public Inspection

OMB No. 1545-0047

Employer identification number

94-3079524

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part I

YOGA ALLIANCE REGISTRY

	(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 to organizations during the tax year.)		he organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	1 IV, line 34 because	it had one or more re	lated tax-exempt

סופשוויקשווסווס מחוווופ חום ושע לפשוי/							
(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	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	b)(13)
		·		501(c)(3))		Yes	 2
YAPLUS - 38-3849013							
1701 CLARENDON BOULEVARD STE 110	SEE SCHEDULE R, PART VII			> 1	YOGA ALLIANCE		
ARLINGTON, VA 22209	FOR FULL DESCRIPTION.	VIRGINIA	501(C)(6)	ш.	REGISTRY	×	
				•		-	

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Schedule R (Form 990) 2012 YOGA ALLIANCE REGISTRY

Part III organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile	(d) Direct controlling	(e)		(f) Share of total			(h) Disproportion-	(i) Code V:UB	(J) General or	(j) (k) General or Percentage
of related organization		(state or foreign country)	entity	(related, u excluded fro sections ((related, unrelated, excluded from tax under sections 512-514)	іпсоте	end-of-year assets		ations?	amount in box 20 of Schedule K-1 (Form 1065)	ox managing lie partner? 55) Yes No	ownership
			·									
	,		C				1	1000	7000			100
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organization or trust during the tax year.) (a) (b) (c) (c) S corp, S corp, and EIN Primary activity (state or freeign of related organization asserts (corp. S corp, or trust) (b) (c) (c) Corp. S corp, income entity (c) Fart IV, line 34 because it had one or more related or more rela	anizations Taxable	as a Corpo	corporation or Trust (Cotax year.) (b) Primary activity	(c) Legal domicile (state or foreign	le organization ans (d) Direct controlling	ling Type (C co	rered "Yes" to Fom (e) Type of entity (Ccorp, Scorp, or frust)	(f) Share of total income	, line 34 r	4 because it ha (g) Share of end-of-year assets	(h) Percentage	Section 5-12(0) controlled entity?
				(Kaunoo			,				:	Yes
										•		
										·		
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Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

North Complete line 1 if any entity is listed in Darts II III or IV of this school le					Yes	g
Note: Complete line 1 in any control is leaved in a table, in, or of the following transactions	s with one or more rel	iz. transactions with one or more related organizations listed in Parts II-IV?	n Parts II-IV?		135	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1 a		×
				1b		M
				10		×
l oans or loan guarantees to or for related organization(s)	-			19	M	
		· · · · · · · · · · · · · · · · · · ·		⊢	-	×
e Loans or loan guarantees by related organization(s)	***************************************	***************************************		ַ		4
						4 (1)
f Dividends from related organization(s)				#		M
g. Sale of assets to related organization(s)		-		19		×
Purchase of assets from related organization(s)				두	<u> </u>	×
				Ŧ		×
Excharige of assets with related organization(s)				;		×
J Lease of facilities, equipment, or other assets to related organization (s)				7	100	3
1. I and of familities and imment or other secute from related arganization(c)				*		×
K Lease of Jacillus, equipment, of other assets not related organization (s)				=	-	ı ×
i Perrormance of services of membership of fundraising solicitations for related organization(s)	Inization(s)			Ę	-	4×
The contract of services of instruction of furthersing solicitations by report of the	יייייייייייייייייייייייייייייייייייייי			+	╁	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)				×;	
 Sharing of paid employees with related organization(s) 				၉	×	
					print print print	
 Beimbursement paid to related organization(s) for expenses 				4		×
				5		×

				+		
r Other transfer of cash of property to related organization(s)				• ,		1 >
s Other transfer of cash or property from related organization(s)	***************************************			18	1	4
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.	who must complete the	is line, including covered	relationships and transaction thresholds.	ŀ		
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1) YAPLUS	Q	447,041.	447,041.ACCUMULATED LOAN BALANCE	r c o)		
(9) VAPI.IIS	Z	100,964.	100,964.ACTUAL COSTS		•	
(3) YAPLUS	0	100,318.	PERSONNEL ALLOCATION			
(4)						
(5)						
(9)						
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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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.

(a) (b) (c) (d)	(Q)	(5)	9	(9)	€	(3)	3	6	8	3
Name, address, and EIN of entity	Primary activity	micile oreign	t income related,	Are all partners sec. 501(c)(3) orgs.?	윤 🕇	Share of end-of-year	Disproportionate allocations?	Dispropor- tionare amount in box 20 managing ownership allocations? of Schedille K-1 partner?	General or managin partner	Percentage g ownership
		country)	under section 512-514) y	es No	income	assets	Yes No	(Form 1065)	Yes No	6
							_			
									_	
									1	
							•			
			-	, .						
							-			
	·									
								1 4 4 6	1	000
								OCHECUIE	<u>ي ا</u> ا	schedule R (Form 990) zu iz

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