PUBLIC DISCLOSURE COPY

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

Department of the Treasury Internal Revenue Service

▶ 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.

Inspection

OMB No. 1545-0047

А	FOI LIN	and and a secondar year, or tax year beginning	i enaing				
В	Check if applicabl	C Name of organization		D Employer identif	ication number		
	Addre chang	S YAPLUS					
	Name chang	Doing business as YOGA ALLIANCE		38-3	3849013		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numb	 er		
	Final return.	1560 WILSON BOULEVARD	700	(571)482-3355			
_	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,912,783.		
Ļ	Amen	ARDINGTON, VA 22209-2400		H(a) Is this a group			
	Application pendi			for subordinate			
		SAME AS C ABOVE		H(b) Are all subordinates			
		empt status: \square 501(c)(3) \square 501(c) (6) \blacktriangleleft (insert no.) \square 4947(a)(1)	or 527	⊣ ′	a list. (see instructions)		
		te: WWW.YOGAALLIANCE.ORG		H(c) Group exempti			
		organization: X Corporation Trust Association Other	L Year	of formation: 2011	M State of legal domicile: VA		
P	art I	Summary	D3.D0 T	TT T T T T T T T T T T T T T T T T T T			
9	1	Briefly describe the organization's mission or most significant activities: SEE	PART 1	LII, LINE I	·		
Governance							
Æ	2	Check this box if the organization discontinued its operations or dispositions of the organization discontinued its operations or dispositions or dispositions are also as a second or disposition of the organization discontinued its operations or disposition of the organization discontinued its operation dis			_		
် ဗ	3			3			
જ	"	Number of independent voting members of the governing body (Part VI, line 1b)			58		
ties	1	Total number of individuals employed in calendar year 2017 (Part V, line 2a)			10		
Activities &		Total number of volunteers (estimate if necessary)					
Ac		Total unrelated business revenue from Part VIII, column (C), line 12					
	b	Net unrelated business taxable income from Form 990-T, line 34			1		
		One to the string of any other (Douts) (III. Fine 41s)		Prior Year	Current Year 0 .		
Revenue		Contributions and grants (Part VIII, line 1h)		2,182,604			
Ven		Program service revenue (Part VIII, line 2g)		65.			
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		198,409			
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,381,078			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0,			
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.			
	1	Benefits paid to or for members (Part IX, column (A), line 4)	· ·	1,061,626			
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0,			
Expenses	loa	Professional fundraising fees (Part IX, column (A), line 11e)	····	<u> </u>	0.		
Ä	1 47	Total fundraising expenses (Part IX, column (D), line 25)		1,961,798.	1,601,473.		
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,023,424	3,218,995.		
				-642,346			
J.	3	Revenue less expenses. Subtract line 18 from line 12		eginning of Current Year			
ets (20	Total assets (Part X, line 16)	<u> </u>	272,450			
ASSI	21	Total liabilities (Part X, line 16)		3,929,754			
Net Assets or Find Balances	22	Net assets or fund balances. Subtract line 21 from line 20		-3,657,304			
P	art II	Signature Block		0,00.,002			
		lties of perjury, I declare that I have examined this return, including accompanying schedule	es and statem	ents, and to the best of r	nv knowledge and belief, it is		
		ct, and complete. Declaration of preparer (other than officer) is based on all information of w			,		
Sig	ın	Signature of officer		Date			
He		▶ DAVID LIPSIUS, PRESIDENT AND CEO					
		Type or print name and title					
		Print/Type preparer's name Preparer's signature		Date Check	PTIN		
Pai	d			if self-emplo	ved		
Pre	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	52-1392008		
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N					
		BETHESDA, MD 20814-2930		Phone no. (3	301) 951-9090		
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$

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Total program service expenses

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Form 990 (2017) YAPLUS Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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	N/	A
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	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	х	
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
1Za	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
-	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		Х
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		Х
10	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	17		- 22
18	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,"	10		
	complete Schedule G, Part III	19		Х

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Part IV Checklist of Required Schedules (continued) YAPLUS

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		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			
	Schedule K. If "No", go to line 25a	24a		X
	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		
	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	05-	N/	7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	14 /	<u> </u>
D	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	OEh	N/	Δ
06	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b	14 /	_
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
		26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
_	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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		Х
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	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	X	
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?			L
	If "Yes," complete Schedule R, Part V, line 2	36	N/	A
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?		7.7	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

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Form 990 (2017) YAPLUS Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O Contains a response of note to any line in this Part v					
			4.5		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	17			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				7,	
	(gambling) winnings to prize winners?	i		1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Ε0			
	filed for the calendar year ending with or within the year covered by this return		58		37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns the control of t			2b	Х	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					v
				3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			Х
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?	4a		
D	If "Yes," enter the name of the foreign country:	A 000110	+o (FDAD)			
5 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			5a		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did to			30		
va	any contributions that were not tax deductible as charitable contributions?			6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contribu			- Ou		
-	were not tax deductible?		-	6b		
7	Organizations that may receive deductible contributions under section 170(c).		N/A			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	ervices p	rovided to the payor?	7a		
	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 v					
	to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contrac	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con-	tract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	zation fi	le a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	d by the	_e N/A			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.		/-			
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		N/A	9b		
10	Section 501(c)(7) organizations. Enter:	1 1				
	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders N/A	المدا				
		11a				
D	Gross income from other sources (Do not net amounts due or paid to other sources against	446				
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b)	120		
	/_	1 1		12a		
ъ 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	Is the organization licensed to issue qualified health plans in more than one state?		N/A	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.		-1, -1	isa		
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
D	organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c				
	Did the second still a second			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu			14b		
					990	(2017

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI				X
Sec	tion A. Governing Body and Management				
		1 1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1 1 .			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with any other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the	he direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person? \dots		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed?	4		Х
5	ssets?	5		Х	
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint one or			
	more members of the governing body?		7a		Х
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				
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenue Code.)			
				Yes	No
10a	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 of				
	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 bo	dy before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," describe			
	in Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approv				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?			
а	The organization's CEO, Executive Director, or top management official		15a	Х	
b	Other officers or key employees of the organization		15b		Х
	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 arrange	ement with a			
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	anization's			
	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)	availab	ole	
	for public inspection. Indicate how you made these available. Check all that apply				
	Own website Another's website X Upon request Other (explain	n in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict of interest policy, ar	nd finan	cial	
	statements available to the public during the tax year.	•			
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks and records:			
	SHANNON ROCHE - (571)482-3355				
	1560 WILSON BOULEVARD, STE 700, ARLINGTON, VA 223	209-2408			

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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 or note to any line in this Part VII

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

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

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

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

(A)	(B)	l	X1 112C		C)	прог	1041	(D)	(E)	(F)
Name and Title	Average	Position					Reportable	Reportable	Estimated	
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week	_	cer an	a a a	irecto	ctor/trustee)		from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	truste	al trus		yee	mpen		(** 27 1033 141100)		and related
	below	dual	Institutional trustee	_	Key employee	est co oyee	-e			organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			-
(1) KERRY MAIORCA	5.00									
CHAIR	5.00	Х		Х				0.	0.	0.
(2) TERRI MCDERMOTT	3.00									
VICE CHAIR	3.00	Х		Х				0.	0.	0.
(3) MARION MUGS MCCONNELL	3.00									
SECRETARY	3.00	Х		Х				0.	0.	0.
(4) SWAMI ASOKANANDA	3.00									_
BOARD MEMBER	3.00	Х						0.	0.	0.
(5) DAVID PRYOR, JR.	3.00									
BOARD MEMBER	3.00	Х						0.	0.	0.
(6) STAFFAN SELGELID	3.00									
BOARD MEMBER	3.00	Х						0.	0.	0.
(7) ARUN TILAK	3.00									
BOARD MEMBER (THROUGH 05/17)	3.00	Х						0.	0.	0.
(8) GYANDEV MCCORD	3.00									
BOARD MEMBER (THROUGH 05/17)	3.00	Х						0.	0.	0.
(9) JORDAN DIPIETRO	3.00									
BOARD MEMBER (THROUGH 06/17)	3.00	Х						0.	0.	0.
(10) BRANDON HARTSELL	3.00							_	_	_
BOARD MEMBER	3.00	Х						0.	0.	0.
(11) BARBARA J. DOBBERTHIEN	20.00									
EXECUTIVE DIR. & COO (THROUGH 06/17)	20.00			Х				152,020.	0.	12,205.
(12) DAVID LIPSIUS	20.00								_	
CEO AND PRESIDENT (BEG. 05/17)	20.00			Х				183,768.	0.	8,774.
(13) SHANNON ROCHE	20.00								_	
COO (BEG. 07/17)	20.00			Х				101,050.	0.	8,652.
(14) KIM HORN	20.00								_	
AVP OF HUMAN RESOURCES	20.00					Х		112,886.	0.	29,445.
(15) JANEL KILEY	20.00					<u></u>		100 100		F 064
UX MANAGER	20.00					Х		100,490.	0.	5,064.
			_		_		_			
							<u> </u>			- 000

Form **990** (2017)

Form 990 (2017) YAPLUS 38-3849013 Page **8**

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A) (B) (C)					(D)	(E)			(F)					
	Name and title	Average	(do		Pos		than	one	Reportable	Reportable		Es	timate	∍d
		hours per	box	, unle	ss pe	erson	is bot or/trus	h an	compensation	compensation			nount	of
		week (list any	_	Cer an	lu a u	III ecil	Jiriius	iee)	from	from related			other	
		hours for	directo				_		the organization	organization (W-2/1099-MIS			pensa om th	
		related	9e or (stee			nsated		(W-2/1099-MISC)	(***-2/1099-14110)		anizat	
		organizations	trust	nal tru		yee	ompe		,			_	d relat	
		below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	anizati	ons
		line)	Pu	lns	ijij	Key	en Hig	For						
						<u> </u>								
						<u> </u>								
						\vdash								
						╁								
1b	Sub-total			<u> </u>		<u> </u>		•	650,214.		0.	6	4,1	40.
	Total from continuation sheets to Part VI							•	0.		0.			0.
	Total (add lines 1b and 1c)								650,214.		0.	6	4,1	40.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed a	bov	e) wł	no r	eceived more than \$100	,000 of reportab	le			
	compensation from the organization													5
													Yes	No
3	Did the organization list any former officer,			e, ke	ey er	mplo	yee	or	highest compensated e	mployee on				37
_	line 1a? If "Yes," complete Schedule J for s											3		X
4	For any individual listed on line 1a, is the su	-		-					•	-			Х	
-	and related organizations greater than \$150											4	Λ	
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com										·	5		х
Sec	tion B. Independent Contractors	piete Scriedui	e	01 50	JCII	pers	SOII .					3		
1	Complete this table for your five highest co	mpensated inc	dene	ende	ent c	cont	racto	ors 1	that received more than	\$100,000 of con	nens	ation f	rom	
•	the organization. Report compensation for	-	-								ipono.	u		
	(A)								(B)			(C	;)	
	Name and business								Description of s	ervices	С	ompe		n
	LSBURY WINTHROP SHAW							- 1	LEGAL CONSUL	TING				
). BOX 601240, CHARLOT								SERVICES			55	7,8	26.
	TE & TRYON, 2021 L STR	EET NW;	Sī	JIT	ľЕ	4	00		ACCOUNTING			~ ~		0.0
	SHINGTON, DC 20036	10100 ~-	T3 T -	~			- - -		CONSULTING S			33	4,1	02.
	ROAD, SUITE 500, RESTON, VA 20190 SERVICES 200,554.													
KUF	AD, SUITE 500, RESTON,	VA ZUIS	J U					-	SERVICES			∠∪	υ, 5	<u> </u>

Form **990** (2017)

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

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Form 990 (2017) YAPLUS
Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	or note to any lir	ne in this Part VIII			
			·	,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
इ इ	1 a	Federated campaigns	1a					012 014
ran		Membership dues						
<u> </u>		Fundraising events						
ifts		Related organizations						
",g		Government grants (contribut						
Sii		All other contributions, gifts, gran						
her	•	similar amounts not included above						
	a	Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f						
		Total Med Ta 11		Business Code				
o l	2 a	MEMBERSHIP				3,637,482.		
اءُ جَ	b	YACEP DESIGNATI	ON FEE	900099	3,637,482. 125,924.	125,924.		
Program Service Revenue	c	-			,	,		
am	d	-						
Ba	e							
Pr	f	All other program service reve	nue					
	g	-			3,763,406.			
	3	Investment income (including						
		other similar amounts)						
	4	Income from investment of tax						
	5	Royalties			149,377.			149,377.
		·	(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
		Net rental income or (loss)		>				
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
		Net gain or (loss)		>				
nue		Gross income from fundraising including \$	g events (not					
Other Rever		contributions reported on line						
r.		Part IV, line 18						
the	b	Less: direct expenses						
0		Net income or (loss) from fund						
		Gross income from gaming ac						
	_	Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam		•				
		Gross sales of inventory, less	-					
		and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sale						
İ		Miscellaneous Revenu		Business Code				
Ţ	11 a							
	b	·						
	С							
	d	All other revenue						
		Total. Add lines 11a-11d		•				
	12	Total revenue. See instructions.			3,91 <u>2,</u> 783.	[3,763,406.]	0.	149,377.

Form 990 (2017) YAPLUS 38-3849013 Page 10

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b. Total expenses Program service Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 233,235 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,109,662. Other salaries and wages _____ 7 Pension plan accruals and contributions (include 29,283 section 401(k) and 403(b) employer contributions) 144,442. Other employee benefits 9 100,900. Payroll taxes 10 Fees for services (non-employees): a Management 172,558. Legal 181,886. Accounting 71,882. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 263,060 column (A) amount, list line 11g expenses on Sch O.) 96,363. Advertising and promotion 12 36,995. Office expenses 13 93,366. 14 Information technology Royalties 15 155,202. 16 Occupancy 57,096. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 36,101. Conferences, conventions, and meetings 19 51,510. Interest 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 11,980. 23 Other expenses. Itemize expenses not covered 24 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.) 236,759. ASSET USAGE EXPENSE CREDIT CARD PROC. FEES 117,351. DUES AND SUBSCRIPTIONS 4,992. 3,648. PAYROLL SERVICE FEES 10,724. e All other expenses 3,218,995. Total functional expenses. Add lines 1 through 24e 25 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)

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Form 990 (2017)
Part X Balance Sheet

Ра	πχ	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			209,823.	1	555,290.
	2	Savings and temporary cash investments			100.	2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			16,191.	4	11,967.
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa	ated en	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			
şţ		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges	46,336.	9	198,146.		
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	4,818,001.			
	b	Less: accumulated depreciation	10b	3,330,099.	0.	10c	1,487,902.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14	4,812,989.		
	15	Other assets. See Part IV, line 11		0.	15	80,609.	
	16	Total assets. Add lines 1 through 15 (must equa			272,450.	16	7,146,903.
	17	Accounts payable and accrued expenses		170,692.	17	202,159.	
	18	Grants payable		1 560 416	18	0 251 502	
	19	Deferred revenue			1,560,416.	19	2,371,593.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
es	22	Loans and other payables to current and former					
Ħ		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela		 		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of	2 100 646		7 526 667
		Schedule D			2,198,646. 3,929,754.	25	7,536,667. 10,110,419.
	26			V	3,343,734.	26	10,110,419.
		Organizations that follow SFAS 117 (ASC 958		ck nere 🚩 🔼 and			
ces		complete lines 27 through 29, and lines 33 and			-3,657,304.	07	-2,963,516.
Fund Balances	27	Unrestricted net assets			-3,037,304.	27	-2,903,310.
Ba	28	Temporarily restricted net assets				28	
ဋ	29			N shook have N		29	
		Organizations that do not follow SFAS 117 (A	SC 958	s), check here			
0	200	and complete lines 30 through 34.				20	
se	30	Capital stock or trust principal, or current funds				30 31	
Net Assets or	31	Paid-in or capital surplus, or land, building, or ed				32	
Š	32	Retained earnings, endowment, accumulated in			-3,657,304.	33	-2,963,516.
	33	Total liabilities and not assets fund balances			272,450.	34	7,146,903.
	34	Total liabilities and net assets/fund balances			414,430.	ა 4	1,140,303.

Form **990** (2017)

Form 990 (2017) YAPLUS 38-3849013 Page **12**

Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	1 2 3 4 5 6 7 8 9	3,91 3,21	2,7 8,9 3,7	95. 88.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
_	column (B))	10	<u>-2,96</u>	3,5	<u> 16.</u>	
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				N-	
1 2a	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	No X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?			Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	e basis,	20			
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?					
3а	If the organization changed either its oversight process or selection process during the tax year, explain in Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Act and OMB Circular A-133?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits	ired audit	3b			
			Form	990 ((2017)	

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

Tax	() (see separate instructions), then				
•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nar	me of organization			Empl	oyer identification number
	YAPLUS				38-3849013
Pa	art I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		▶ \$	
Pá	art I-B Complete if the org	ganization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶\$	
2	Enter the amount of any excise tax	5 ▶\$			
	If the organization incurred a section				
48	a Was a correction made?				Yes No
	b If "Yes," describe in Part IV.				
Pá	art I-C Complete if the org	ganization is exempt und	der section 501(c)	, except section 501(c)(3).
		s. Add lines 1 and 2. Enter here a 1120-POL for this year? Inployer identification number (El Ition listed, enter the amount pai Input yand directly delivered to	and on Form 1120-POL IN) of all section 527 po id from the filing organi a separate political org	blitical organizations to whiczation's funds. Also enter the panization, such as a separa	Yes No The filing organization The amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Part II-A Complete if the organic section 501(h)).	anization is exe	empt under section	n 501(c)(3) and fil	ed Form 5768 (e	lection under			
A Check ▶ ☐ if the filing organizat	ion belongs to an af	filiated group (and list i	n Part IV each affiliated	group member's nam	ne, address, EIN,			
expenses, and share					, ,			
B Check ▶ ☐ if the filing organizati	ion checked box A	and "limited control" pr	ovisions apply.					
	s on Lobbying Expo itures" means amo	enditures ounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to influ	ence public opinion	(grass roots lobbying)						
b Total lobbying expenditures to influ	ence a legislative bo	ody (direct lobbying)						
c Total lobbying expenditures (add lir								
d Other exempt purpose expenditure	S							
e Total exempt purpose expenditures	(add lines 1c and 1	d)						
f Lobbying nontaxable amount. Enter	r the amount from the	ne following table in bot	th columns.					
If the amount on line 1e, column (a) or	If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:							
Not over \$500,000	Not over \$500,000 20% of the amount on line 1e.							
Over \$500,000 but not over \$1,000	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000							
Over \$1,000,000 but not over \$1,50	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,00							
Over \$1,500,000 but not over \$17,0	ess over \$1,500,000.							
Over \$17,000,000	Over \$17,000,000 \$1,000,000.							
h Subtract line 1g from line 1a. If zeroi Subtract line 1f from line 1c. If zeroj If there is an amount other than zero	g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under section 501(h)							
(Oome organizations th		rate instructions for li	•	or the five columns t	CIOW.			
	Lobbying Expe	enditures During 4-Ye	ar Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total			
2a Lobbying nontaxable amount								
b Lobbying ceiling amount (150% of line 2a, column(e))								
c Total lobbying expenditures								
d Grassroots nontaxable amount								
e Grassroots ceiling amount								
(150% of line 2d, column (e))								
f Grassroots lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2017

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)).

local legislation, including any attempt to or referendum, through the use of: a Volunteers? b Paid staff or management (include com c Media advertisements? d Mailings to members, legislators, or the e Publications, or published or broadcast	on attempt to influence foreign, national, state or	Yes		1	
local legislation, including any attempt to referendum, through the use of: a Volunteers? b Paid staff or management (include com c Media advertisements? d Mailings to members, legislators, or the e Publications, or published or broadcast			No	Amo	ount
or referendum, through the use of: a Volunteers? b Paid staff or management (include com c Media advertisements? d Mailings to members, legislators, or the e Publications, or published or broadcast					
 a Volunteers? b Paid staff or management (include com c Media advertisements? d Mailings to members, legislators, or the e Publications, or published or broadcast 	o influence public opinion on a legislative matter				
 b Paid staff or management (include com c Media advertisements? d Mailings to members, legislators, or the e Publications, or published or broadcast 					
 b Paid staff or management (include com c Media advertisements? d Mailings to members, legislators, or the e Publications, or published or broadcast 					
d Mailings to members, legislators, or thee Publications, or published or broadcast	pensation in expenses reported on lines 1c through 1i)?				
e Publications, or published or broadcast					
	public?				
	statements?				
f Grants to other organizations for lobbying	ng purposes?				
g Direct contact with legislators, their stat	ffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conv	ventions, speeches, lectures, or any similar means?				
i Other activities?					
j Total. Add lines 1c through 1i					
	anization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax inc	curred under section 4912				
c If "Yes," enter the amount of any tax inc	curred by organization managers under section 4912				
d If the filing organization incurred a secti	on 4912 tax, did it file Form 4720 for this year?				
	zation is exempt under section 501(c)(4), sect	ion 501(c)	(5), or se	ection	
501(c)(6).					
				Yes	No
	es received nondeductible by members?				X
2 Did the organization make only in-house	e lobbying expenditures of \$2,000 or less?		2		X
	lobbying and political campaign activity expenditures from			X	
501(c)(6) and if either (a		3 "NO," OF			ne 3, is
answered "Yes."	s from members		R (b) Par	t III-A, lii	ne 3, is
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amounts	s from members and political expenditures (do not include amounts of poli		R (b) Par	t III-A, lii	
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amounts	and political expenditures (do not include amounts of poli		R (b) Par	t III-A, lii	
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amount: 2 Section 162(e) nondeductible lobbying expenses for which the section 527(f)	and political expenditures (do not include amounts of poli	ical	R (b) Par	t III-A, l ii	3,406 1,882
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amount: 2 Section 162(e) nondeductible lobbying expenses for which the section 527(f) a Current year	and political expenditures (do not include amounts of poli tax was paid).	iical	R (b) Par	3,763 72 -260	3,406 1,882 0,826
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amount 2 Section 162(e) nondeductible lobbying expenses for which the section 527(f) a Current year b Carryover from last year	and political expenditures (do not include amounts of poli) tax was paid).	ical	1 2a 2b	72 -260	3,406 1,882 0,826 3,944
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amount 2 Section 162(e) nondeductible lobbying expenses for which the section 527(f) a Current year b Carryover from last year c Total	and political expenditures (do not include amounts of poli tax was paid).	ical	1 2a 2b 2c	72 -260	3,406 1,882 0,826 3,944
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amount 2 Section 162(e) nondeductible lobbying expenses for which the section 527(f) a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6	and political expenditures (do not include amounts of poli) tax was paid).	ical	1 2a 2b 2c	72 -260	3,406 1,882 0,826 3,944
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amount: 2 Section 162(e) nondeductible lobbying expenses for which the section 527(f) a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 64 If notices were sent and the amount on	and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures). 5033(e)(1)(A) notices of nondeductible section 162(e) dues	ccess	1 2a 2b 2c	72 -260	3,406 1,882 0,826 3,944
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amount: 2 Section 162(e) nondeductible lobbying expenses for which the section 527(f) a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 64 If notices were sent and the amount on does the organization agree to carryover	and political expenditures (do not include amounts of political expenditures (do not include amounts of political examples). 6033(e)(1)(A) notices of nondeductible section 162(e) dues line 2c exceeds the amount on line 3, what portion of the ear to the reasonable estimate of nondeductible lobbying and	ccess political	2a 2b 2c 3	73,763 73,763 73,763 74,7260 74,7260 74,7260	3,406 1,882 0,826 3,944 5,987
501(c)(6) and if either (a answered "Yes." 1 Dues, assessments and similar amount: 2 Section 162(e) nondeductible lobbying expenses for which the section 527(f) a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 64 If notices were sent and the amount on does the organization agree to carryove expenditure next year?	and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures). 6033(e)(1)(A) notices of nondeductible section 162(e) dues line 2c exceeds the amount on line 3, what portion of the e	ccess political	2a 2b 2c 3	73,763 73,763 73,763 74,7260 74,7260 74,7260	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number YAPLUS 38-3849013

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose	e conferring
	impermissible private benefit?	······································	Yes No
Par	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release		
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	ation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	•	
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	s the organization's accounting for
Dat	conservation easements. † III Organizations Maintaining Collections of	f Aut Listariaal Transcurse or C	Other Cimilar Assets
Pai			Other Similar Assets.
4-	Complete if the organization answered "Yes" on Form		are and a seed by allow a seed and a seed a seed as se
ıa	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh	,	ance of public service, provide, in Part XIII,
L	the text of the footnote to its financial statements that describe the experience elected as permitted under SEAS 116 (AS		at and balance about works of ort biotoxical
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ec	ducation, or research in furtherance of pt	ablic service, provide the following amounts
	relating to these items:		Δ.
	(i) Revenue included on Form 990, Part VIII, line 1		
•			
2	If the organization received or held works of art, historical treather following appropriate to the following appropriate the following property of		ai gain, provide
_	the following amounts required to be reported under SFAS 1:		•
a	Revenue included on 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.

Schedule D (Form 990) 2017

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		439,854.	102,633.	337,221.
d Equipment		271,412.	189,044.	82,368.
e Other		4,106,735.	3,038,422.	1,068,313.
Total. Add lines 1a through 1e. (Column (d) must equa	1,487,902.			

Schedule D (Form 990) 2017

Part VII Investments - Other Securities.			,
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or el	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15.)	>	>
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) LOAN PAYABLE TO YOGA ALLIA	ANCE	6 808 010	
(3) REGISTRY		6,797,812.	
(4) DEFERRED RENT LIABILITY	\	367,240.	
(5) DEFERRED TENANT IMPROVEMEN	N'I'	251 615	
(6) ALLOWANCE		371,615.	

(9) 7,536,667. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) \triangleright 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2017

(7) (8)

Schedule D (Form 990) 2017

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 38-3849013 YAPLUS Part I Questions Regarding Compensation

	·		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	4a	Х	
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		
	The organization?	5a		
b	Any related organization?	5b		
•	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
_	contingent on the net earnings of:	C-		
a	The organization?	6a		
D	Any related organization?	6b		
7	If "Yes" on line 6a or 6b, describe in Part III.			
′	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
o	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	3		
3	Regulations section 53.4958-6(c)?	9		
	negulations section 55.4550-0(c):	,		

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

Schedule J (Form 990) 2017

YAPLUS

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

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

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

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(B)(i)-(D)	reported as deferred on prior Form 990
(1) BARBARA J. DOBBERTHIEN (83,270.	0.	68,750.	2,031.	10,174.	164,225.	0.
EXECUTIVE DIR. & COO (THROUGH 06/17)	0.	0.	0.	0.	0.	0.	0.
(2) DAVID LIPSIUS (0.	0.	2,769.	6,005.	192,542.	0.
CEO AND PRESIDENT (BEG. 05/17)		0.	0.	0.	0.	0.	0.
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Schedule J (Form 990) 2017	YAPLUS	38-3849013	Page 3
Part III Supplemental Information	ion		
Provide the information, explanati	on, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, a	nd for Part II. Also complete this part for any additional information	n.
PART I, LINE 4A:			
BARBARA DOBBERTHI	EN RECEIVED A SEVERANCE PAYMENT OF \$68,750 I	N 2017.	

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ Go to www.irs.gov/Form990 for the latest information. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

YAPLUS

Employer identification number 38-3849013

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

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE BOARD RECEIVED A COPY OF THE FORM 990 BEFORE IT WAS FILED WITH THE IRS.

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

BOARD MEMBERS ARE ASKED TO ANNUALLY 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 YAPLUS; AND WILL DISCLOSE TO THE BOARD OF DIRECTORS, ON THE PRESCRIBED FORM AND PERIODICALLY AS FACTS DICTATE, ANY SUCH CONFLICTS OF INTEREST AND ANY BUSINESS, FINANCIAL, AND 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/HERSELF 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 COO THAT THE VOLUNTARY SERVICE IS APPROPRIATE AND DOES NOT PRESENT A CONFLICT OF INTEREST WITH THEIR WORK FOR YAPLUS. YAPLUS 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 AT LEAST ANNUALLY. IF A CONFLICT OF LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Name of the organization YAPLUS	Employer identification number 38-3849013
INTEREST ARISES, YAPLUS INTERVIEWS THE EMPLOYEE IN QUESTI	ON TO REVIEW THE
POSSIBLE CONFLICT. IF IT WAS DETERMINED THAT THE EMPLOYEE	HAD A GENUINE
CONFLICT OF INTEREST, HE/SHE WOULD BE ASKED TO CEASE THE	ACTIVITY
IMMEDIATELY IN ORDER TO CONTINUE WITH EMPLOYMENT.	
FORM 990, PART VI, SECTION B, LINE 15A:	
ONE OF THE ROLES OF THE EXECUTIVE COMMITTEE OF THE BOARD	OF DIRECTORS (BOD)
IS TO REVIEW THE PERFORMANCES OF THE PRESIDENT/CEO AND CO	O AND DETERMINE
COMPENSATION ON AN ANNUAL BASIS. THE BOD DISCUSSES COMPEN	SATION WITH
OUTSIDE COUNSEL AND PURCHASES DATA THAT COMPARES COMPENSA	TION FOR
ASSOCIATION AND MEMBERSHIP EXECUTIVES. DATA IS VERY DETAI	LED AND BREAKS THE
INFORMATION DOWN WITH REGARD TO THE ORGANIZATION'S ANNUAL	BUDGET, NUMBER OF
EMPLOYEES, YEARS IN POSITION AND GEOGRAPHIC LOCATION. INF	ORMATION IS SHARED
AND REVIEWED WITH THE EXECUTIVE COMMITTEE. THE LAST REVIE	W TOOK PLACE IN
MAY 2017.	
FORM 990, PART VI, SECTION C, LINE 19:	
YAPLUS PROVIDES DOCUMENTS UPON REQUEST.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

➤ Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

YAPLUS

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

38-3849013

Part I Identification of Disregarded Entities. Complete	te if the organization answered "Yes	s" on Form 990, Part IV, line 30	3.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Total inco	(e) me End-of-year	assets Direct of	(f) controlling ntity
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34,	because it had one	or more related tax-exe	empt
(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?
				501(c)(3))		Yes No

TO SUSTAIN AND SUPPORT THE

FIELD OF YOGA

YOGA ALLIANCE REGISTRY D/B/A YOGA FOUNDATION
- 94-3079524, 1560 WILSON BOULEVARD, STE

700, ARLINGTON, VA 22209

Х

WASHINGTON

501(C)(3)

LINE 10

N/A

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

	organizations decided do a partitioning during the tax year.										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Predominant income (related, unrelated, income xcluded from tax under			ortionate itions?	amount in box	General managin partner	Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes N)
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

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

Page 3

Yes No

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

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

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

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

b	Gift, grant, or capital contribution to related organization(s)				1b		X		
	Gift, grant, or capital contribution from related organization(s)								
	d Loans or loan guarantees to or for related organization(s)								
	Loans or loan guarantees by related organization(s)				1e	X			
	Dividends from related organization(s)				1f		X		
g	Sale of assets to related organization(s)				1g	Х	Х		
h	h Purchase of assets from related organization(s)								
i	Exchange of assets with related organization(s)				1i		X		
j	j Lease of facilities, equipment, or other assets to related organization(s)								
	Lease of facilities, equipment, or other assets from related organization(s)				1k	Х	X		
	Performance of services or membership or fundraising solicitations for related organization(s)								
	m Performance of services or membership or fundraising solicitations by related organization(s)								
	Sharing of facilities, equipment, mailing lists, or other assets with related organization				1n	Х	<u> </u>		
0	Sharing of paid employees with related organization(s)				10	Х			
						l			
	Reimbursement paid to related organization(s) for expenses				1 p	Х			
q	Reimbursement paid by related organization(s) for expenses				1q	Х			
							37		
	Other transfer of cash or property to related organization(s)				1r		X		
	Other transfer of cash or property from related organization(s)				1s		Х		
2	If the answer to any of the above is "Yes," see the instructions for information on w	vho must complete t	his line, including covered re	elationships and transaction thresholds.					
	(a) Name of related organization	(d) Method of determining amount in							
	•	type (a-s)		Ç					
(1)									
(2)									
(3)									
(4)									
<i>-</i>									
(5)									
(C)									
(6)									
	3 09-11-17	27		Schedule	D /F	000	10047		

Schedule R (Form 990) 2017 YAPLUS 38 – 3849013 Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on 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)	(e) Are a)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are a	all S sec.	Share of	Share of	Disp	ropor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	or Percentage
of entity		(state or foreign	(related, unrelated,	partners 501(c) orgs)(3)	total	end-of-year	alloca	nate ations?	amount in box 20	managir partner	ownership
·		country)	sections 512-514)	Yes		income	assets	Voc	No	(Form 1065)	Yes N	7
				res	NO			res	INO	(* 2 * * * * * * * * * * * * * * * * * *	resin	'
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