Kraft & Company, PLLC 114 29th Avenue South Nashville, TN 37212

> Small World Yoga, Inc. 1119 12th Avenue South Nashville, TN 37203

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May 23, 2023

Small World Yoga, Inc. 1119 12th Avenue South Nashville, TN 37203

Dear Liz:

Enclosed is the organization's 2022 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by November 15, 2023.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Sincerely,

Kraft & Company, PLLC

Form 8879-TE IRS e-file Signature Authorization		OMB No. 1545-0047		
		al year beginning, 2022, and ending	, 20	იიიი
Department of the Treasury Internal Revenue Service		Do not send to the IRS. Keep for your records. www.irs.gov/Form8879TE for the latest information.		2022
Name of filer			EIN or SSN	
Small Small	World Yoga, I	inc.	46-52	78254
Name and title of officer or pe	,	z Veyhl		
David L Truck of I		SCUTIVE DIRECTOR		
	Return and Return	ntormation g this Form 8879-TE and enter the applicable amount, if any		
or 10a below, and the amo	ount on that line for the re ank (do not enter -0-). But	I other forms, enter whole dollars only. If you check the box turn being filed with this form was blank, then leave line <b>1k</b> ; if you entered -0- on the return, then enter -0- on the applie <b>Fotal revenue,</b> if any (Form 990, Part VIII, column (A), line 1.	<b>5, 2b, 3b, 4b, 5b,</b> cable line below.	6b, 7b, 8b, 9b, or 10b, Do not complete more
2a Form 990-EZ che		Fotal revenue, if any (Form 990-EZ, line 9)		2b
3a Form 1120-POL of		<b>Fotal tax</b> (Form 1120-POL, line 22)		3b
4a Form 990-PF che		Fax based on investment income (Form 990-PF, Part V, lir		4b
5a Form 8868 check		Balance due (Form 8868, line 3c)		5b
6a Form 990-T check		Total tax (Form 990-T, Part III, line 4)		6b
7a Form 4720 check		Total tax (Form 4720, Part III, line 1)		7b
8a Form 5227 check		FMV of assets at end of tax year (Form 5227, Item D)		8b
9a Form 5330 check	here b 1	Fax due (Form 5330, Part II, line 19)		9b
10aForm 8038-CP chPart IIDeclarat		Amount of credit payment requested (Form 8038-CP, Par Authorization of Officer or Person Subject to	t III, line 22)	10b
		an officer of the above entity or I am a person subject		
financial institution to debi later than 2 business days payment of taxes to receiv	t the entry to this accoun prior to the payment (set e confidential information	the tax preparation software for payment of the federal tax t. To revoke a payment, I must contact the U.S. Treasury Fi tlement) date. I also authorize the financial institutions invol n necessary to answer inquiries and resolve issues related to e for the electronic return and, if applicable, the consent to	nancial Agent at <sup>-</sup> lved in the proces o the payment. I h	1-888-353-4537 no sing of the electronic ave selected a
PIN: check one box only				
I authorize			_ to enter my PI	
		ERO firm name		Enter five numbers, but do not enter all zeros
with a state age on the return's d	ncy(ies) regulating charitie lisclosure consent screen		e aforementioned	ERO to enter my PIN
return. If I have i	ndicated within this return	n respect to the entity, I will enter my PIN as my signature o n that a copy of the return is being filed with a state agency N on the return's disclosure consent screen.		
Signature of officer or person subject Part III Certifica	t to tax tion and Authentica	ation	Date	
ERO's EFIN/PIN. Enter yo number (EFIN) followed by	•	(0010000		
		ich is my signature on the 2022 electronically filed return ind ements of <b>Pub. 4163,</b> Modernized e-File (MeF) Information		
ERO's signature		Date		
		Must Retain This Form - See Instructions		
	Do Not Submi	t This Form to the IRS Unless Requested To	Do So	
_HA For Privacy Act and	Paperwork Reduction	Act Notice, see instructions.		Form <b>8879-TE</b> (2022

(Rev. January 2022)

# Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

•				-		
►	File a	separate	application	for	each return.	

► Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.* 

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о				Taxpayer identification number (TIN)		
print	Small World Yoga, Inc.				46-52782	54
File by the due date f filing your return. See	Number, street, and room or suite no. If a P.O. box, s 1119 12th Avenue South					
instruction	Nashville, TN 37203					
Enter th	e Return Code for the return that this application is for (file	e a separat	e application for each return)	<u></u>		<u>. 01</u>
Applica	tion	Return	Application			Return
ls For		Code	Is For			Code
Form 99	00 or Form 990-EZ	01	Form 1041-A			08
Form 47	720 (individual)	03	Form 4720 (other than individual)			09
Form 99	90-PF	04	Form 5227			10
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	90-T (trust other than above)	06	Form 8870			12
Form 99	00-T (corporation) KRAFT & COMPANY	07				
Telep If the If thi box 1 In the 2 If	books are in the care of ▶ <u>114 29TH AVE.</u> books are in the care of ▶ <u>114 29TH AVE.</u> books are in the care of ▶ <u>6152440278</u> corganization does not have an office or place of business is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ▶ request an automatic 6-month extension of time until ne organization named above. The extension is for the organization named above. The extension is for the organization request an automatic 9-000 or . Tax year beginning the tax year entered in line 1 is for less than 12 months, control of the organization is for the organization of the o	s in the Uni Group Exe and atta Nover anization's , an heck reaso	Fax No.       ▶         ted States, check this box	this is fo Il memb	r the whole group, ers the extension is npt organization ret 	for.
	this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.	), enter the	tentative tax, less	3a	\$	0.
b lf	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and			
e	stimated tax payments made. Include any prior year overp	ayment all	owed as a credit.	3b	\$	0.
сB	alance due. Subtract line 3b from line 3a. Include your pa	ayment with	n this form, if required, by			
u	sing EFTPS (Electronic Federal Tax Payment System). See	<u>e instructio</u>	ns	3c	\$	0.
Caution instruct	<ol> <li>If you are going to make an electronic funds withdrawal ions.</li> </ol>	(direct det	bit) with this Form 8868, see Form 845	53-TE an	d Form 8879-TE for	payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

Form <b>990</b>
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Check if applicable:

В

## Extended to November 15, 2023 **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

and ending

**Open to Public** Inspection

D Employer identification number

Departn	nent of	the Tr	- age unv
Internal	Reven	ue Ser	vice

A For the 2022 calendar year, or tax year beginning

C Name of organization

X	Address change	Small World Yoga, Inc.			
	Name change	Doing business as		46-527825	4
	Initial Ireturn         Number and street (or P.0. box if mail is not delivered to street address)         Room/suite           Final Freturn/ return/         1119         12th         Avenue         South			E Telephone number 615-784-9	642
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	417,262.
	Amende return			H(a) Is this a group ret	um
	Applica- tion pending			for subordinates?	Yes X No
	pending	same as C above		H(b) Are all subordinates incl	uded? Yes No
I Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527 If "No," attach a list. See ins					st. See instructions
_	/ebsite			H(c) Group exemption	number
K Fo	orm of o	rganization: 🚺 Corporation 🔄 Trust 🔄 Association 📄 Other	L Year	of formation: 2014 M	State of legal domicile: TN
Pa	rt I	Summary			
	<b>1</b> B	riefly describe the organization's mission or most significant activities: Smal	1 Worl	d Yoga Inc. :	makes yoga
ဦ	a	accessible to more people so they can sha	re in	its mental,	physical,
Governance	<b>2</b> C	Check this box if the organization discontinued its operations or dispos	than 25% of its net asse	ets.	
Nel 2	<b>3</b> N	lumber of voting members of the governing body (Part VI, line 1a)		3	4
	<b>4</b> N	lumber of independent voting members of the governing body (Part VI, line 1b)		4	4
ې مې	5 T	otal number of individuals employed in calendar year 2022 (Part V, line 2a)		5	0

Governance	-	accessible to more people so they can share i	n its mental	, physical,
rna	2	Check this box if the organization discontinued its operations or disposed of n	nore than 25% of its net as	ssets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)		4
ۍ م	4	Number of independent voting members of the governing body (Part VI, line 1b)		4
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	0
viti	6	Total number of volunteers (estimate if necessary)		
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7:	
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		
			Prior Year	Current Year
evenue	8	J (		
	9	Program service revenue (Part VIII, line 2g)	340,839.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	552,940.	417,262.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	63,172.	
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
xpense	b	Total fundraising expenses (Part IX, column (D), line 25) 0.		
ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	297,675.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	360,847.	
	19	Revenue less expenses. Subtract line 18 from line 12	192,093.	
or			Beginning of Current Year	
sets alan	20	Total assets (Part X, line 16)	361,946.	
t As d Bi	21	Total liabilities (Part X, line 26)	18,312.	
Fun	22	Net assets or fund balances. Subtract line 21 from line 20	343,634.	337,069.
Pa	rt II	Signature Block		

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

Sign	Signature of officer Date					
Here	LIZ VEYHL, EXECUTIVE DIRE	CTOR				
	Type or print name and title					
	Print/Type preparer's name	Preparer's signature	Digitally signed by Joy Bra	AV Check X	_ PTIN	
Paid	Joy Bray	Joy Bray	Date: 2023.06.01 08:58:26		P00951455	
Preparer	Firm's name Kraft & Company,	PLLC		Firm's EIN 62	-1002003	
Use Only	Firm's address 114 29th Avenue S	outh				
	Nashville, TN 372	12		Phone no. (61	5) 244-3991	
May the I	May the IRS discuss this return with the preparer shown above? See instructions					
232001 12-1	232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)					

See Schedule O for Organization Mission Statement Continuation

	n 990 (2022) Small World Yoga, Inc.	46-5278254	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
	Small World Yoga Inc. makes yoga accessible to		an
	share in its mental, physical, and emotional he	alth benefits.	
2	Did the organization undertake any significant program services during the year which were n	at listed on the	
2			XNo
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		21 NU
3	Did the organization cease conducting, or make significant changes in how it conducts, any p		XNo
Ū	If "Yes," describe these changes on Schedule O.		110
4	Describe the organization's program service accomplishments for each of its three largest pro	ogram services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and		nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$267,843. including grants of \$	) (Revenue \$ 58,	326 <b>.</b> )
	STUDIO		
41	(Code:) (Expenses \$52,990. including grants of \$	) (Revenue \$ 97,	<u>912 \</u>
4b	(Code:     ) (Expenses \$	) (Revenue \$ <b>31 ,</b>	042.)
	OUTREACH		
4c	(Code:) (Expenses \$16,409. including grants of \$	) (Revenue \$ 56 ,	876.)
	TEACHER TRAINING		
<u></u>			
4d		<sup>°</sup>	
40		enue \$ )	
4e	Total program service expenses 337,242.		

Form	aan	(2022)
FOITH	990	(2022)

Form 990 (2022) Small World Yoga, Inc. 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		X
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		X
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
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 donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
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,		х	
Ŀ.	Part VI	<u>11a</u>		
a	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		x
А	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>	<u>11c</u>		- 23
u		11d		x
<u>م</u>	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	х	
f				
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
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			
	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,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a		20a		X
	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

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Form 990 (2022) Small World Yoga, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			
	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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
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		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?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
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 on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 38			
b				
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

1c

	990 (2022) Small World Yoga, Inc. 46-5278	254	P	<sub>age</sub> 5
Par	<b>V</b> Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
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?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			37
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		- <b>v</b>
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	0		
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a h	Initiation fees and capital contributions included on Part VIII, line 12     10a       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities     10b	-		
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter:	1		
11				
a b	Gross income from members or shareholders 11a Gross income from other sources. (Do not net amounts due or paid to other sources against	1		
b				
12a	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
h	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			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	<u> </u>		
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
-	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Small World Yoga, Inc. Manage

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Form 990 (2		World			46-5278254	Page <b>6</b>
Part VI	Governance, Managem	ent, and I	Disclosure	e. For eac	h "Yes" response to lines 2 through 7b below, and for a "No" res	sponse
					s, or changes on Schedule O. See instructions.	
	Check if Schedule O contains	response o	r note to any	ling in this	Part \/I	X

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	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 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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
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 reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on 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 rise to conflicts?	12b	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
•	on Schedule O how this was done	12c	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 approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		х
	Other officers or key employees of the organization	15b		X
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			_
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
100	taxable entity during the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	Tou		
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed <b>TN</b>			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, and 990-T (section 501(c)(3):	s only) :	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.		andi	
	Own website       Another's website       X       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_•	KRAFT & COMPANY, PLLC - 6152440278			
	114 29TH AVE. SOUTH, NASHVILLE, TN 37212			

Check if Schedule O contains a respo	onse or note to	any	' line	e in t	his I	Part	VII				
Section A. Officers, Directors, Trustees, Key	Employees, aı	nd H	ligh	est (	Con	nper	Isate	ed Employees			
<ul> <li>1a Complete this table for all persons required to</li> <li>List all of the organization's current officers</li> <li>Enter -0- in columns (D), (E), and (F) if no compension</li> </ul>	s, directors, tru	stee									
• List all of the organization's current key em	-		e th	e ins	struc	ction	s foi	r definition of "key empl	oyee."		
<ul> <li>List the organization's five current highest c who received reportable compensation (box 5 of l \$100,000 from the organization and any related o</li> <li>List all of the organization's former officers</li> </ul>	Form W-2, box rganizations.	6 of	f For	m`1	099	-MIS	C, a	nd/or box 1 of Form 10	99-NEC) of more than	) 000 of	
<ul> <li>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.</li> <li>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 organization and any related organizations.</li> </ul>											
See the instructions for the order in which to list t					.,			<b>3</b>			
X Check this box if neither the organization no	or any related o	orga	niza	tion	con	nper	Isate	ed any current officer, di	rector, or trustee.		
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average hours per week	Der box, unless person is both an officer and a director/trustee)			n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other			
	(list any	ctor						the	organizations	compensation	
	hours for	Individual trustee or director				ted		organization	(W-2/1099-MISC/	from the	
	related	stee o	Institutional trustee		æ	Highest compensated employee		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations below	ual tru	ional 1		ploye	t com		1099-NEC)		and related organizations	
	line)	divid	stitut	Officer	Key employee	ighes	Former			organizations	
(1) REGINE WEBSTER	10.00	-1	<u> </u>	0	×	Ξω					
PRESIDENT				x				0.	0.	0.	
(2) MICHAEL WINTER	10.00										
TREASURER				x		Y -		0.	0.	0.	

Form 990 (2022)Small World Yoga, Inc.46-5Part VIICompensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

**Employees, and Independent Contractors** 

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Form 990 (2022) Small Wor	rld Yoga	ι,	In	с.					46-52	2782	254	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)			<b>(C</b> Posi				(D)	(E)			(F)	
Name and title	Average hours per		not c	heck r	more	than o		Reportable	Reportable	_		timate	
	week							compensation from	compensation from related			ount other	OT
	(list any	tor						the	organizations			pensa	tion
	hours for	Individual trustee or director				eq		organization	(W-2/1099-MIS			om th	
	related	tee or	ustee			ensat		(W-2/1099-MISC/	1099-NEC)		orga	anizat	ion
	organizations	al trus	nal tr		loyee	e comp		1099-NEC)				l relat	
	below	ividua	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	nizati	ons
	line)	Ind	Ins	Offi	Key	e Hig	Бr						
										$\rightarrow$			
										$\rightarrow$			
										$\rightarrow$			
4. 0.0000								0.		0.			0.
1b Subtotal c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								0.		0.			0.
2 Total number of individuals (including but n					-	) wh	0 rc		000 of reportable				••
compensation from the organization		000	lioto	u us			010						0
					7							Yes	No
3 Did the organization list any <b>former</b> officer,	director, trust	ee, k	ey e	mpl	oye	e, or	hig	hest compensated emp	loyee on	ſ			
line 1a? If "Yes," complete Schedule J for s											3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150										[	4		Х
5 Did any person listed on line 1a receive or a	iccrue comper	isati	, on fr	om a	any	unre	late	ed organization or individ	dual for services				
rendered to the organization? If "Yes," com	plete Schedule	e J fe	or sı	ich p	bers	on .					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co										ensati	on fro	m	
the organization. Report compensation for	the calendar ye	ear e	endir	ig wi	ith c	or wi	:hin		ear.				
(A) Name and business	address	NIC	ONE	7				(B) Description of s	ervices	Co	<b>C)</b> mper		n
		110		-				20001101101101					
							$\neg$						
							_						
• Total number of index on the total of the		ot /!:	<b></b>		-		he d		are their				
2 Total number of independent contractors (ii \$100,000 of compensation from the organic	•		mec	1 LO T	tnos (		rea	above, who received m					

Part				<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	-		40 5270	
		Check if Schedule O c	contains a	a response	or note to any line	e in this Part VIII (A)	(B)	(C)	
						Total revenue	Related or exempt function revenue		Revenue exclud from tax unde sections 512 - 5
ts S	1 a	Federated campaigns		1a					
and Other Similar Amounts	b	Membership dues		1b					
Ĩ	С	Fundraising events		1c					
ar	d	Related organizations		1d					
<u>i</u>	е	Government grants (contri	butions)	1e	13,455.				
S	f	All other contributions, gifts, g	grants, and	t l					
the		similar amounts not included	above	1f	190,758.				
0 p	g	Noncash contributions included in I	ines 1a-1f	1g \$					
an	h	Total. Add lines 1a-1f				204,213.			
					Business Code				
		COMMUNITY OUT	REACH	[]	812900	97,842.	97,842.		
Ð	b	STUDIO			812900	58,326.	58,326.		
nue	С	TEACHER TRAIN	ING		812900	56,876.	56,876.		
eve	d								
Řevenue	е								
	f	All other program service r	revenue						
	g	Total. Add lines 2a-2f				213,044.			
;	3	Investment income (includ	ling divide	ends, intere	est, and			_	
						5.		5.	
	4 Income from investment of tax-exempt bond proceeds				proceeds				
	5	Royalties							
				(i) Real	(ii) Personal				
		Gross rents	6a						
	b	Less: rental expenses $\dots$	6b						
	С	Rental income or (loss)	6c						
	d	Net rental income or (loss)							
	7 a	Gross amount from sales of	(i) \$	Securities	(ii) Other				
		assets other than inventory	7a						
	b	Less: cost or other basis							
an		and sales expenses	7b						
nevenue		. ,	7c						_
Ê	d	Net gain or (loss)							
	8 a	Gross income from fundraisin	•						
5		including \$							
		contributions reported on							
		Part IV, line 18							
		Less: direct expenses			1				
		Net income or (loss) from f		-					
1	9 a	Gross income from gaming							
	-	Part IV, line 19							
		Less: direct expenses							
		Net income or (loss) from (	•						
1	υa	Gross sales of inventory, le							
		and allowances							
		Less: cost of goods sold							
-	С	Net income or (loss) from s	sales of ir	iventory					
					Business Code				
9 <sup>1</sup>	1 a								
/en	b								
Revenue L	C								
		All other revenue							
		Total. Add lines 11a-11d				117 000	010 044		
1	2	Total revenue. See instructio	ns	<u></u>		417,262.	213,044.	5.	- 000 /

Small World Yoga, Inc.

Form 990 (2022)

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26

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Joint costs. Complete this line only if the organization

if following SOP 98-2 (ASC 958-720)

Form Dar	990 (2022) Small World t IX   Statement of Functional Expense			4
	on 501(c)(3) and 501(c)(4) organizations must compl		er organizations must con	nplete column (A).
	Check if Schedule O contains a response		this Part IX	
	not include amounts reported on lines 6b,	<b>(A)</b> Total expenses	<b>(B)</b> Program service	(C) Management a
7b, 8	8b, 9b, and 10b of Part VIII.		ĕxpenses	general expens
1	Grants and other assistance to domestic organizations			
	and domestic governments. See Part IV, line 21			
2	Grants and other assistance to domestic			
	individuals. See Part IV, line 22			
3	Grants and other assistance to foreign			
	organizations, foreign governments, and foreign			
	individuals. See Part IV, lines 15 and 16			
4	Benefits paid to or for members			
5	Compensation of current officers, directors,			
	trustees, and key employees	60,000.	30,000.	30,0
6	Compensation not included above to disqualified			
	persons (as defined under section 4958(f)(1)) and			
	persons described in section 4958(c)(3)(B)			
7	Other salaries and wages			
8	Pension plan accruals and contributions (include			
	section 401(k) and 403(b) employer contributions)			
9	Other employee benefits	4 070	2 400	
10	Payroll taxes	4,978.	2,489.	2,4
11	Fees for services (nonemployees):			
	Management			
	Legal	0 766	4 002	4.0
	Accounting	9,766.	4,883.	4,8
	Lobbying			
	Professional fundraising services. See Part IV, line 17			
	Investment management fees			
g	Other. (If line 11g amount exceeds 10% of line 25,			
	column (A), amount, list line 11g expenses on Sch 0.)	242	242	
12	Advertising and promotion	243.	243.	2 0
13	Office expenses	6,190.	3,095.	3,0
14	Information technology			
15	Royalties	14 762	14 760	
16		14,762. 219.	<u>14,762.</u> 219.	
17	Travel	219.	219.	
18	Payments of travel or entertainment expenses			
	for any federal, state, or local public officials			
19 00	Conferences, conventions, and meetings	6,116.	6,116.	
20	Interest	0,110.	0,110.	
21	Payments to affiliates	5,119.	5,119.	
22	Depreciation, depletion, and amortization	2,483.	2,483.	
23	Insurance	403.	403.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)			
а	INDEPENDENT CONTRACTORS	281,173.	235,055.	46,1
b	UTILITIES	6,852.	6,852.	i
с	JOB SUPPLIES	6,750.	6,750.	
d	MERCHANDISE EXPENSE	5,162.	5,162.	
е	All other expenses	14,014.	14,014.	
25	Total functional expenses. Add lines 1 through 24e	423,827.	337,242.	86,5
26	loint costs. Complete this line only if the organization			

**(D)** Fundraising expenses

0.

11	World	Yoga,	Inc.	
----	-------	-------	------	--

		Check if Schedule O contains a response or not	e to any	line in this Part X					
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year		
	1	Cash - non-interest-bearing			361,946.	1	183,766.		
	2	Savings and temporary cash investments				2			
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net				4			
	5	Loans and other receivables from any current or							
		trustee, key employee, creator or founder, subst	tantial co	ontributor, or 35%					
		controlled entity or family member of any of the	se perso	ns		5			
	6	Loans and other receivables from other disquali	Loans and other receivables from other disqualified persons (as defined						
		under section 4958(f)(1)), and persons described		6					
s	7	Notes and loans receivable, net				7			
Assets	8	Inventories for sale or use				8	×		
¥	9					9			
	10a	Land, buildings, and equipment: cost or other							
		basis. Complete Part VI of Schedule D	10a	342,255.					
	b	Less: accumulated depreciation		5,119.	0.	10c	337,136.		
	11	Investments - publicly traded securities		11					
	12	Investments - other securities. See Part IV, line		12					
	13	Investments - program-related. See Part IV, line		13					
	14	Intangible assets		14					
	15	Other assets. See Part IV, line 11				15			
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	3)	361,946.	16	520,902.		
	17	Accounts payable and accrued expenses				17			
	18	Grants payable				18			
	19	Deferred revenue				19			
	20	Tax-exempt bond liabilities				20			
	21	Escrow or custodial account liability. Complete	Part IV c	of Schedule D		21			
S	22	Loans and other payables to any current or form	ner office	er, director,					
Liabilities		trustee, key employee, creator or founder, subs							
iabi		controlled entity or family member of any of the	se perso	ns		22			
-	23	Secured mortgages and notes payable to unrela	ated third	d parties	0.	23	182,761.		
	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					1		
		of Schedule D			18,312.		1,072.		
	26	Total liabilities. Add lines 17 through 25			18,312.	26	183,833.		
6		Organizations that follow FASB ASC 958, che	eck here						
čě		and complete lines 27, 28, 32, and 33.							
alan	27					27			
Ä	28	Net assets with donor restrictions				28			
ŭ		Organizations that do not follow FASB ASC 9	58, che	ck here X					
Ē		and complete lines 29 through 33.			^				
ts	29	Capital stock or trust principal, or current funds			0.	29	0.		
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or ed			0.	30	0.		
t A:	31	Retained earnings, endowment, accumulated in			343,634.	31	337,069.		
Re	32	Total net assets or fund balances			343,634.	32	337,069.		
	33	Total liabilities and net assets/fund balances .			361,946.	33	520,902.		

520,902. Form **990** (2022)

### Form 990 (2022) Part X Balance Sheet Sma

Form	1990 (2022) Small World Yoga, Inc.	46-	-5278254	P	<sub>age</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			262.
2	Total expenses (must equal Part IX, column (A), line 25)	2			327.
3	Revenue less expenses. Subtract line 2 from line 1	3			565.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	34	.3,6	534.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	33	7, C	)69.
Pa	rt XII Financial Statements and Reporting		~		
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			
				Yes	No No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule C	).		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?				<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red aud	lit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		<u> </u>
			Form	n <b>990</b>	<b>)</b> (2022)

	HED rm 99	OULE A 0)			rity Status an					OMB No. 1545-0047
		the Treasury ue Service		494 At	47(a)(1) nonexempt cha ttach to Form 990 or Fo Form990 for instructior	ritable tru rm 990-E	ıst. Z.			Open to Public Inspection
Nam	e of t	he organizati		do to www.n3.gov/			intest in	ormation.	Employer	identification number
		-	Smal	1 World Yo	ga, Inc.				4	6-5278254
Pa	rt I	Reason			(All organizations must c	omplete tl	his part.) S	ee instructior		
The	organi	ization is not a	private found	ation because it is: (I	For lines 1 through 12, cl	heck only	one box.)			
1	Ū	A church, cor	nvention of ch	urches, or associatio	on of churches described	in sectio	on 170(b)(	1)(A)(i).		
2					Attach Schedule E (Form					
3		A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	)(b)(1)(A)(i	ii).		
4		A medical res	earch organiz	ation operated in co	njunction with a hospital	described	l in <b>sectio</b>	on 170(b)(1)(A	)(iii). Enter	the hospital's name,
		city, and state	e:							
5		-	-		llege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
6				Complete Part II.)	aantal unit daaaribad in	nantian 1	70/6//4//4	(n)		
6 7		-		•	nental unit described in a ntial part of its support fr				a gonoral r	aublic described in
'		-		omplete Part II.)	Initial part of its support in	onna gove	enninentai		le general j	
8					(1)(A)(vi). (Complete Par	ни)				
9	$\square$	-			in section 170(b)(1)(A)(	-	ed in conii	inction with a	land-grant	college
Ū		-		-	ulture (see instructions).				-	-
		university:		,			, ,	,		
10	X	An organizati	on that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributio	ns, membersh	ip fees, and	d gross receipts from
					t to certain exceptions; a					
		income and u	Inrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the org	ganization a	Ifter June 30, 1975.
		See section	509(a)(2). (Co	mplete Part III.)						
11		An organizati	on organized a	and operated exclusi	ively to test for public sat	fety. See	section 5	09(a)(4).		
12		An organizati	on organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly	supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). (	Check the box on
		7			f supporting organization					
а					upervised, or controlled					
					gularly appoint or elect a	majority o	of the direc	tors or truste	es of the su	ipporting
		- <sup>-</sup>		complete Part IV, Se						
b					l or controlled in connect			-		-
					anization vested in the sa	ame perso	ins that co	ntrol or mana	ge the supp	ported
		¬ ~	. ,	t complete Part IV,	g organization operated	in connoc	tion with	and functional	lly intograte	d with
с			-	-	). You must complete I				ily integrate	u with,
d			-		orting organization oper				ted organiz	zation(s)
u	L		-		ation generally must sat				-	
			,	0	nplete Part IV, Sections					
е		7			written determination from				II. Type III	
	-				nally integrated supporti			· )  ·, · )	, . ,	
f	Ente	r the number		·	, , , , , , , , , , , , , , , , , , ,					
g	Prov	ride the followi	ng informatior	n about the supporte						
	(i	i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the org in your govern	anization listed ing document?	(v) Amount o	-	(vi) Amount of other
		organization	1		above (see instructions))	Yes	No	support (see in	nstructions)	support (see instructions)

Total

Sec	LION A. Public Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	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						
3	The value of services or facilities						
•	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	The portion of total contributions					7	
Ŭ	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	achuma (f)						
6							
	Public support. Subtract line 5 from line 4.						
		(-) 0010	(1-) 0010	(-) 0000	(1) 0001	(-) 0000	(6) Tatal
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,					12	
13	First 5 years. If the Form 990 is for the	e organization's fir	rst, second, third, t	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
_	organization, check this box and stop						
	tion C. Computation of Publi		•			I I	
	Public support percentage for 2022 (li					14	%
	Public support percentage from 2021					15	%
16a	33 1/3% support test - 2022. If the c						
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the c	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not o	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the facts	s-and-circumstanc	es test, check this	box and stop he	<b>re.</b> Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	st. The organizatio	on qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not o	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	e facts-and-circum	nstances test, cheo	ck this box and <b>st</b>	t <b>op here.</b> Explain ii	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s

Schedule A (Form 990) 2022

Uaic	nual year (or inscaryear beginning in)	(a) 2010	(b) 2019	(0) 2020	(u) 2021	(e) 2022	
7	Amounts from line 4						
8	Gross income from interest,		4				
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain			r			
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructio	ins)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, <sup>-</sup>	fourth, or fifth tax y	/ear as a section 5	01(c)(3)	
	organization, check this box and stop	ohere	*				
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box o	n line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ation			
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	<b>re.</b> Explain in Part `	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	istances test, che	ck this box and <b>st</b>	t <b>op here.</b> Explain ir	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s

Small World Yoga, Inc. Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Schedule A (Form 990) 2022

Section A. Public Support

# Small World Yoga, Inc.

 Schedule A (Form 990) 2022
 Small World Yoga, Inc.

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

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

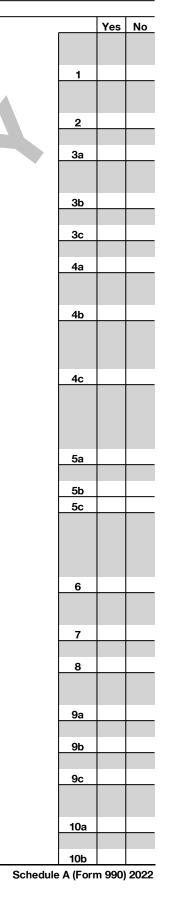
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	119,638.	216,737.	118,575.	212,101.	204,213.	871,264.
2	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	9,227.	15,704.	250,808.	340,839.	213,044.	829,622.
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				$\bigcirc$		
6	Total. Add lines 1 through 5	128,865.	232,441.	369,383.	552,940.	417,257.	1700886.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
С	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						1700886.
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	128,865.	232,441.	369,383.	552,940.	417,257.	1700886.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4				5.	5.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	G				5.	5.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	128,865.	232,441.	369,383.	552,940.	417,262.	1700891.
14	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, 1	fourth, or fifth tax y	vear as a section 5	01(c)(3) organizatic	n,
_							
	ction C. Computation of Publi						100 00
	Public support percentage for 2022 (I			olumn (f))			100.00 %
	Public support percentage from 2021					16	100.00 %
	ction D. Computation of Inves						
	Investment income percentage for 20			ne 13, column (f))		17	.00 %
	Investment income percentage from					18	%
19a	<b>33 1/3% support tests - 2022.</b> If the more than 33 1/3%, check this box ar						7 is not
b	<b>33 1/3% support tests - 2021.</b> If the line 18 is not more than 33 1/3%, che	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	nd
20	Private foundation. If the organization		•	-		-	

# Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

## Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *(* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)



#### Small World Yoga, Inc.

Schedule A	(Form 990)	2022	Small	World	Yoga,
Part IV	Suppor	ting Or	ganizations (co	ontinued)	

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
e	ction B. Type I Supporting Organizations			
			Yes	N
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			

Inc.

effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If* "Yes," *explain in* **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the superiord exercise (a)	1		1

	portica orga		
Section D.	All Type	III Supporting	Organizations

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

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a \_\_\_\_ The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* line 3 below.

с		The organization supported a	governmental entity.	Describe in Part VI how	vou supported a governmen	tal entity (see instructions).
---	--	------------------------------	----------------------	-------------------------	---------------------------	--------------------------------

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

Yes No

	All other Type III non-functionally integrated supporting organizations must co	Junbier	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		~
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount, Subtract line 5 from line 4 unless subject to			

emergency temporary reduction (see instructions).

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

6

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1

Smal	l World	Yoga.	Inc
Dillar.	T NOTIG	rogu,	T T C

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through F

Sche	edule A (Form 990) 2022 Small World Y	'oga, Inc.			6-5278254 Pag
_	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu	ued)	•
Sect	ion D - Distributions		1		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations	6	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - D	rovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	is	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
_	Remaining underdistributions for 2022. Subtract lines 3h				

and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.

7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	Small	World	Yoga,	Inc.	46-5278254 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	mation. P , 2, 3b, 3c, 4 lines 2 and 3	rovide the ex b, 4c, 5a, 6, 3; Part IV, Se	kplanations 9a, 9b, 9c, ction E, line	required by Part II, line 10; Part I I1a, 11b, and 11c; Part IV, Secti	I, line 17a or 17b; Part III, line 12; on B, lines 1 and 2; Part IV, Section C, line 1; Part V, Section B, line 1e; Part V,
						0
				·		

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

46-5278254

Organization type (check of	lej.
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

Small World Yoga, Inc.

#### **General Rule**

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set.

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

lame of o	rganization		Employ	er identification number
mall	World Yoga, Inc.		46-	-5278254
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed	l.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		(d) Date received
		\$		

Schedule B (Form 990) (2022)

223453 11-15-22

Name of o	rganization			Employer identification number							
Small	World Yoga, Inc.			46-5278254							
Part III	Exclusively religious, charitable, etc., contribut	ons to organizations described in s	section 501(c)(7), (8), or (10)								
	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 o	r less for the year. (Enter this info	. once.) \$							
(a) No.	Use duplicate copies of Part III if additional	space is needed.									
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held							
Parti											
-											
		(e) Transfer of g	jift								
	Transferee's name, address, a	nd ZIP + 4	Relationship of tr	ansferor to transferee							
ľ	,, _,, _										
(a) No.											
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held							
-	(e) Transfer of gift										
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee										
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held							
Part I	(-)		(-,	<b>3</b>							
		(e) Transfer of g	jift								
	Transferee's name, address, a	and $7IP \pm 4$	Belationshin of tr	ansferor to transferee							
			Holdtonomp of a								
(a) No. from											
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held							
-	(e) Transfer of gift										
		(0)									
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee								

		· • · ·					EAE OF	147	
SC	HEDULE D		al Financial Statements		OMB No. 1545-0047				
(Forr	n 990)		anization answered "Yes" on Form 990, ), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2022				
Depart	ment of the Treasury		Attach to Form 990.		Open to Public				
	I Revenue Service		00 for instructions and the latest information.			Inspec			
Nam	e of the organizati	on Small World Yoga,	Inc	Emp	loyer ide	ntificatio 5278		nber	
Pa	rt I Organiza		d Funds or Other Similar Funds or A	ccoun					
I u		on answered "Yes" on Form 990, Part IV, lir		oooun		ipiere il i	.110		
			(a) Donor advised funds	(b) Fun	ds and oth	ner acco	unts		
1	Total number at er	nd of year		. ,					
2		of contributions to (during year)							
3		of grants from (during year)							
4		t end of year							
5			writing that the assets held in donor advised fu	nds					
	-		exclusive legal control?			Yes		No	
6			advisors in writing that grant funds can be used						
	for charitable purp	ooses and not for the benefit of the donor o	or donor advisor, or for any other purpose confe	rring					
	impermissible priv	ate benefit?				Yes		No	
Pa	rt II Conserv	ation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part I	/, line 7.					
1	Purpose(s) of cons	servation easements held by the organizati	ion (check all that apply).						
	Preservation	n of land for public use (for example, recrea	ation or education)	torically	important	land are	a		
	Protection o	of natural habitat	Preservation of a cer	tified his	storic struc	cture			
		n of open space							
2	-		fied conservation contribution in the form of a c	onservat					
	day of the tax year				Held at th	e End of t	ne lax	Year	
а				2a					
b	•			2b					
с			ructure included in (a)	2c					
d		vation easements included in (c) acquired							
3			leased, extinguished, or terminated by the orga	2d	during the	tox			
3		valion easements modified, transferred, re	leased, extinguished, or terminated by the orga	IZALION		lax			
4	year	 where property subject to conservation ea	sement is located						
5		tion have a written policy regarding the pe							
Ŭ		forcement of the conservation easements i				Yes		No	
6	,		handling of violations, and enforcing conservat				/ear		
Ŭ		theare devoted to monitoring, increasing,	nanding of violations, and officially consolvat			ing the j	oui		
7	Amount of expens	ses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservation e	asement	s durina t	he vear			
		5, 1 5,	5		5	,			
8	Does each conser	vation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(I	3)(i)					
	and section 170(h)	)(4)(B)(ii)?				Yes		No	
9	In Part XIII, describ	oe how the organization reports conservat	ion easements in its revenue and expense state	ment and	b				
	balance sheet, and	d include, if applicable, the text of the foot	note to the organization's financial statements t	nat desc	ribes the				
_	organization's acc	ounting for conservation easements.	· · · · · · · · · · · · · · · · · · ·		<u> </u>				
Pa			f Art, Historical Treasures, or Other	Similar	Assets	5.			
		f the organization answered "Yes" on Form							
<b>1</b> a	0	, ,	58, not to report in its revenue statement and ba			6			
		· · · · ·	blic exhibition, education, or research in further	ance of p	oublic				
			ncial statements that describes these items.						
b	-		58, to report in its revenue statement and baland						
			c exhibition, education, or research in furtherand	ce ot pub	DIC Service	Э,			
	-	ing amounts relating to these items:			*				
					⊅				
~	.,				⊅				
2	-		easures, or other similar assets for financial gain	provide	1				
-	•	unts required to be reported under FASB A	0	,	Ť				
a b					\$				
u	Losers Incinated IU	ויטווו ששט, דמונא			Ψ				

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990
232051	09-01-22

Sche		orld Yoga,				278254 Page 2						
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or C	Other Similar Asse	ts (continued)						
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	e following that ma	ake significant use of it	S						
	collection items (check all that apply):											
а	Public exhibition	d	I 📃 Loan or ex	change program								
b	Scholarly research	e	e 🗌 Other									
с	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explair	n how they further	the organization's	s exempt purpose in Pa	rt XIII.						
5	During the year, did the organization solicit o	r receive donations o	of art, historical tre	asures, or other s	imilar assets							
	to be sold to raise funds rather than to be ma		<u>u</u>			Yes No						
Par	t IV Escrow and Custodial Arran		ete if the organizat	ion answered "Ye	s" on Form 990, Part IV	/, line 9, or						
	reported an amount on Form 990, Pa											
1a	Is the organization an agent, trustee, custodi											
	on Form 990, Part X?				L	Yes No						
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:									
Amou												
	Beginning balance											
	Additions during the year											
e	Distributions during the year											
1	Ending balance Did the organization include an amount on Fe					Yes No						
	If "Yes," explain the arrangement in Part XIII.											
Par												
	Complete	(a) Current year	(b) Prior year	(c) Two years b		k (e) Four years back						
1a	Beginning of year balance											
b	Contributions											
c	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr		e (line 1g, column (	(a)) held as:								
а	Board designated or quasi-endowment		%									
b	Permanent endowment	%										
с	Term endowment	%										
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.										
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held a	and administered	for the							
	organization by:					Yes No						
	(i) Unrelated organizations					3a(i)						
	(ii) Related organizations					3a(ii)						
b	If "Yes" on line 3a(ii), are the related organization			?		3b						
4	Describe in Part XIII the intended uses of the		wment funds.									
Par	t VI Land, Buildings, and Equipm			0 F 000 F								
	Complete if the organization answere											
	Description of property	(a) Cost or o basis (investn		st or other s (other)	(c) Accumulated depreciation	(d) Book value						
1a	Land											
	Buildings		3	42,255.	5,119.	337,136.						
	Leasehold improvements											
	Equipment											
	Other					220 126						
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	<u>X. column (B). line</u>	10c.)		337,136.						

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 Small World	Yoga, Inc.	46	5-5278254 Page <b>3</b>
Part VII Investments - Other Securities. Complete if the organization answered "Yes"	on Form 990 Part IV line	11b Soc Form 000 Part V line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
			d of year market value
<ul><li>(1) Financial derivatives</li><li>(2) Closely held equity interests</li></ul>			
(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.	on Form 000 Dort IV line	11a Saa Farm 000 Part V line 12	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d of voar market value
		(c) Method of Valuation. Cost of en	u-or-year market value
<u>(1)</u>			
(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"		11d. See Form 990, Part X, line 15.	1
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
<u>(4)</u>			
(5)			
(6)			
(7)			
(8) (9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		
Part X Other Liabilities.	- 15.)		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	5.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) PAYROLL LIABILITIES			1,072.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	,		1,072.
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statements t	that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2022 Small World Yoga, Inc.		46-5278254 Page 4
Par		ments With Revo	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		5
Pa	t XII Reconciliation of Expenses per Audited Financial State		benses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	<u>4b</u>	
С	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		

Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

232054 09-01-22

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 990- Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.	2022
Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.	Open to Public Inspection
Name of the organization		Employer identification number 46-5278254
Form 990, Par	rt I, Line 1, Description of Organization Miss	ion:
and emotional	l health benefits.	
Form 990, Par	rt VI, Section B, line 11b:	
REVIEW OF 990	0 AT BOARD MEETING.	
Form 990, Par	rt VI, Section B, Line 12c:	
AVAILABLE UPO	ON REQUEST	
Form 990, Par	rt VI, Section B, Line 15:	
AVAILABLE UPO	ON REQUEST	
Form 990, Par	rt VI, Section C, Line 19:	
UPON REQUEST		

#### 2022 DEPRECIATION AND AMORTIZATION REPORT

Form 99	90 Page 10							990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Program Services														
1	Studio Buildout * 990 Page 10 Total Program	06/03/22	SL	39.00		16	342,255.				342,255.			5,119.	5,119.
	Services						342,255.				342,255.	0.		5,119.	5,119.
	* Grand Total 990 Page 10 Depr						342,255.				342,255.	0.		5,119.	5,119.

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone