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Return of Organization Exempt From Income Tax

OMB No 1545-0047 2012

Inspection

Department of the Treasury Internal Revenue Service

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public

	A	For the 2	012 cale	ndar year, or tax yea	r beginning	July 1	, 2012, a	and ending	. Jui	ne 30	, 20 13
	В	Check if ap	plicable	C Name of organization	Maharishi F	Purusha Program		•		D Employe	er identification number
		Address ch	hange	Doing Business As					_		56-1824160
	$\bar{\sqcap}$	Name char	~	Number and street (or	PO box if ma	all is not delivered to	street address)	Room/sur	te	E Telephor	
	ī.	Initial retur	•	1000 Purusha Place					108		304-358-0696
	Ħ.	Terminated		City, town or post office	ce, state, and	ZIP code					
	$\overline{\sqcap}$	Amended		Romney, WV 26757		G Gross receipts \$ 2,108,108					
	Ħ	Application		F Name and address of	orincinal office	r Howard Char	dior		M/a) Is this	<u> </u>	for affiliates? Yes No
	_	Application	i pending	1900 Capital Blvd., N					1	-	cluded? Yes No
			-4 -4-4	501(c)(3)	501(c) ()	527	→ ''		list (see instructions)
	는	Tax-exemption Website:		w.purusha.org	(C) () 4 (Insert no) L 4947(a)(1) or	□ 527	⊣	p exemption	
	K			Corporation Trust	Associa	tion ☐ Other ►	I Ver	ar of formati			of legal domicile NC
	_	art I	Summ			<u> </u>	12.00		1333		or regar commone 140
				escribe the organiza	tion's miss	ion or most sign	ificant activities:	Wo hole	i our progra	m for the	dovelopment of
											oherence and gaining
	<u>9</u>			understanding of the							
	nar			nals in other parts of						ipeu to su	pport world peace
	Governance			is box ► 🗸 if the or						25% of	ite not accote
	ဖွ	1		of voting members	_		•	•			10 Het 400010.
	જ	1		of independent votil						-	9
2013	ij	1		nber of individuals e	-	-		-		5	
20	ctivities			nber of volunteers (-		-	·- · ·		<u>51</u>
607	-ĕ-	-		elated business rev		• • •		.—.—.	÷, .	7a	
80		ľ		ated business taxal			• •			7b	0
	_	5 1	et dine	ateu business taxai	DIE INCOME	1101111 01111 990-	1, 1110 04		Prior Y		Current Year
SCANNED NOV		8 0	Contribu	tions and grants (Pa	rt VIII line	1h)		-			
	Revenue			service revenue (Pa		-	· · · · · ·			1,810,823	1,936,459
	Š	1	-	nt income (Part VIII				_		29,092	93,234
2	æ	1		renue (Part VIII, colu	•	•	•	<u> </u>		35,460	28,382
13		1		enue—add lines 8 th						3,073	3,544
Š				nd similar amounts					•	1,878,448	2,061,619
Ŵ		1		paid to or for memb				· · -		1,135,957	1,127,040 0
				other compensation,	•		-	5_10\		100 000	
	Ses			onal fundraising fees				³⁻¹⁰ , -		162,232	164,638
	Expenses	1		draising expenses (0	0
	ă	1		penses (Part IX, coli				50,994		600.000	000 000
				penses (Fart IX, Con penses. Add lines 13				" F		620,962	682,932
				less expenses. Sub				" ' ├		1,919,151	1,974,610
	- 5		CVCITOC	iess expenses. Our	Hact inte 1		0	· ·	Beginning of Co	-40,703	87,009 End of Year
	ats or	20 T	ntal ass	ets (Part X, line 16)	N		SON I	F			
	Ass	21 T		ilities (Part X, line 2	6)	MOA W. A	2013	· · · -		1,999,233 22,788	2,043,058
	Net Asset Fund Balar	22 N		ts or fund balances.		ine 21 from line	20 Q	· ·		1,976,445	24,715
		art II		ture Block	. Odbadoca	L		· · · l		1,5/0,445}	2,018,343
					yamined this i	etum includios	mpanyung schadule	s and stater	nents and to t	the hest of n	ny knowledge and belief, it is
				ete Declaration of prepa							ny kilowicago ana belief, it is
	_		<u> </u>		TININ	1/1/10	rus				10/27/13
	Sig	jn	Sign	ature of officer		Se (200			Da	ate	
	He	re		Steven G.	Souz	A Assi	stunt Tx	1 15UN	2		
			Туре	or print name and title	<u> </u>						
			Print/Ty	pe preparer's name		Preparer's signature)	Da	te	Charle [PTIN
	Pa									Check L self-emp	
		eparer		ame ▶					Firm	n's EIN ▶	
	US	e Only		ddress ▶						one no	
	Ma	y the IRS		s this return with the	e preparer s	shown above? (s	see instructions)				· · Yes V No
	_			ction Act Notice, see		<u>`</u>		Cat N	o 11282Y		Form 990 (2012)

We were very pleased to be able to support our affiliated Indian organization in India which focuses on training Maharishi Vedic
Pundits as Purusha who practice the techniques and programs of His Holiness Maharishi Mahesh Yogi to unfold their full human
potential through the rapid development of consciousness. These Vedic Pundits are trained to perform traditional Vedic ceremonies
to enliven the total support of Natural Law in individuals, and the environment. Our Indian affiliate is creating a home in India for
thousands of these Pundits who, through their collective practice of Maharishi's TM and TM-Sidhi programs, will generate a
tremendous influence of coherence and peace in the collective consciousness of the entire world. The goal is to generate a strong
enough influence in collective consciousness to ensure world peace and harmony for all countries of the world.

| Constitution of the world of

² art	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
2	complete Schedule A	1 2	1	
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		1
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		√
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
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		*
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
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		√
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	✓	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		√
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	√	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
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		1
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		1
20 a		20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		<u> </u>

Part	V Checklist of Required Schedules (continued)		V	Na
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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		✓
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 25	24a		√
С	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		<u>/</u>
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		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		/
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30	✓	1
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		1
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	1	
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		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	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	<u> </u>	
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	Ь—	1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

	· · · · · · · · · · · · · · · · · · ·			-3
art				_
	Check if Schedule O contains a response to any question in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1		res	NO
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			<u>.</u>
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2 a	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 51			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			- ,-
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a 3b		✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	-30		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ► N/A			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			ļ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b	<u> </u>	✓_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		/
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			<u> </u>
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	\$ 100 TO 1		
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	-	/
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	-
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	, ~		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	L	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓_
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			l
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:			
''a	Gross income from members or shareholders		ŀ	
b	Gross income from other sources (Do not net amounts due or paid to other sources	i	ŀ	
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		L	ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
U	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	1
b	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14h		Ė

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	s in Schedule O. S	iee ins	tructi	ons.
Conti	Check if Schedule O contains a response to any question in this Part VI	· · · · · · · ·		<u> </u>	✓
Secu	on A. Governing Body and Management		_	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 9			
b 2	Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?		2		✓
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other company.		3		/ _
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 9 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders?	on's assets? elect or appoint	4 5 6	✓	√ √
b	Are any governance decisions of the organization reserved to (or subject to approve stockholders, or persons other than the governing body?	al by) members,	7b		1
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	ndertaken during			
a	The governing body?		8a	1	
—b- 9	Each committee with authority to act on behalf of the governing body?		8b	V	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C	<u>) </u>	9	L	1
Secti	on B. Policies (This Section B requests information about policies not required by the	ne Internal Rever	iue C		
40-	Did the agranization have lead chapters burneling as officiated?		400	Yes	No 🗸
10a b	Did the organization have local chapters, branches, or affiliates?		10a		V
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	ore filing the form?	11a	1	†
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	·			136
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could gi		12a 12b	1	
С	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done	policy? If "Yes,"	12c	1	
13 14 15	Did the process for determining compensation of the following persons include a review		13	1	
a	independent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official		15a	<i></i>	√
16a	Other officers or key employees of the organization		15b 16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?	to safeguard the	16b		
	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed ► see Schedule O Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, available for public inspection. Indicate how you made these available. Check all that apply.	•	n 501	(c)(3)s	only)
19	Own website Another's website V Upon request Other (explain in Science Describe in Schedule O whether (and if so, how), the organization made its governing doc and financial statements available to the public during the tax year.	cuments, conflict			oolicy,
20	State the name, physical address, and telephone number of the person who possesses the togramization:		of the	Э	

Part VII	Compensation of Officers, Dire	ectors, Trustees,	Key Employees,	, Highest Compensat	ed Employees, and
	Independent Contractors				

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

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

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

☐ Check this box if neither the organization nor	any related	d orga	anız	atıo	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
				(0	>)					
(A)	(B)			Posi				(D)	(E)	(F)
Name and Title	Average hours per week (list any	box, office	unles er and	s per	rson rect	than one than one that the state of the stat	an ee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related	Indivi	Instit	Officer	Key e	Highe	Form	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional trustee	-87-	Key employee	Highest compensated employee	- ড় -	(W-2/1099-MISC)		organization and related organizations
(1) Dr. Howard Chandler	3.5	1		/				0	o	0
Trustee, President	.25	 	-	<u> </u>		-	-		-	
(2) Dr. Benjamin Feldman	.25	1		1		ŀ		0	اه	o
Trustee, Treasurer	.25	 	┢	Ť						
(3) Dr. Bevan Morris	.25	1	l					0	0	o
Trustee (4) Dr. John Hagelin	.25	<u> </u>	-	<u> </u>		 	-			
	23	1	1					0	o	o
Trustee (5) Dr. Jose Louis-Alveraz	.25	l ·		<u> </u>	┢			<u> </u>		
Trustee	.23	1						٠ ،		o
(6) Rafael David	.75	 		<u> </u>	1		T	 		
Trustee	† 	1						0	0	o
(7) James Egan	.25	l				 				
Trustee	†	1						0	o	o
(9) Diele Lancar	12									
Trustee, Secretary	† <i>:-</i>	1		1	ļ			0	o	d
(9) Jeffrey Irvine	4				T -		\vdash			
Trustee	†	1							0	d
(10) Steven Souza	12									
Assistant Treasurer		1		1				1,000	o	c
(11)										
(12)										
(13)										
(14)	ļ	-		<u> </u>						

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average	box,	ot ch	s pe	rtion more	than c	an	(D) Reportable	(E) Reportable		(F)	
		hours per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee		Key employee	Highest compensated employee	ee) Former	compensation from the organization (W-2/1099-MISC)	compensation fro related organizations (W-2/1099-MISO	ļ	amount other compensa from th organizat and relat organizati	ition e ion ed
(15)						-							
(16)													
(17)											-		
(18)													
(19)		-											
(20)								-					
(21)												-	
(22)													
(23)													
(24)													
(25)													
1b c d	Sub-total			•				> >	1,000		0		0 0
2	Total number of individuals (including bu reportable compensation from the organ	t not limite	d to t				abov	e) w	<u> </u>		,000 o	f	
3	Did the organization list any former o employee on line 1a? If "Yes," complete	fficer, direc	ctor,						oloyee, or high	hest compens	ated		s No
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re greater th	porta an \$	ible 150,	con ,000	npe 0? /	nsatio If "Ye 	on a es,"	and other composite Sci	pensation fron hedule J for	n the such	4	
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue c	ompe comp	ensa lete	tior Sci	n fro hed	m any ule J	y ur for	nrelated organi such person	zation or indiv	idual	5	
Section	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Re year.	compensa port compe	ted in ensati	dep on f	enc or t	dent he d	conti	ract dar	ors that receiv	ed more than th or within the	\$100,0 e orga: 	000 of nization'	s tax
	(A) Name and business ad	dress							(B) Description of	services	Co	(C) empensation	on
None													
								\Box					
								+					
2	Total number of independent contract received more than \$100,000 of comper							o ti	hose listed at	oove) who			

	Part VIII	Statement of Revenue
•		Chack if Schedule O contains a response to any question

		Check if Schedule O contains a respo	nse to any ques	tion in this Part \	VIII		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a	0				
Gra	b	Membership dues 1b	0				
A, C	С	Fundraising events 1c	0				
يَّةِ جَ	d	Related organizations 1d	0				1
Sim S	e	Government grants (contributions) 1e	0				
utio	f	All other contributions, gifts, grants, and similar amounts not included above				•	
ē ₽	_		1,936,459			•	
ind in	g h	Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	138,437	4 000 450			
		Total. Add lines 1a-11	Business Code	1,936,459			
Program Service Revenue	2a	GCWP,I interest on Notes	523000	2E 047	25.047		
æ	 b	Course Revenue	611600	25,847 67,387	25,847	0	0
9	c		011000	01,301	67,387	<u>. </u>	0
er	ď		-				·- <u>-</u>
E	e						"-
gra	f	All other program service revenue.					
P.	g	Total. Add lines 2a-2f	•	93,234		·	
	3	Investment income (including divide					
		and other similar amounts)		28,818	o	0	28,818
	4	Income from investment of tax-exempt bo		0	0	0	0
	-5-	Royalties		0	0	0	0
		(i) Real	(ii) Personal				,
	6a	Gross rents					•
	b	Less: rental expenses					,
	0	Rental income or (loss) 0	0		A		
	d 7a	Net rental income or (loss) Gross amount from sales of (i) Securities	(ii) Other	0	0	<u>_</u>	0
	, u	assets other than inventory 47,489	564	ran, a same ran . Gregoria de Santo de Maria	The second secon		
	ь	Less: cost or other basis	564				1
	-	and sales expenses . 47,489	-1000				!
	С	Gain or (loss) . 0	-436				
	d	Nick company (In col)	▶	-436	0		-436
Other Revenue	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18 a	0	_			
됐	b	Less: direct expenses b	0				
	С	Net income or (loss) from fundraising	events . ►	0		o	0
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a	0				
		Less: direct expenses b	0				
	C	, , , , , ,	/ities ▶	0	0	0	0
		Gross sales of inventory, less returns and allowances a	0	:			
	b	Less: cost of goods sold b	0	_			
	С			0	0	0	0
ļ	4 -	Miscellaneous Revenue	Business Code	_	_		
	11a	Credit Card Rewards	900099	3,544	0	0	3,544
	b			0	0	0	0
	9	All other reverse		0	0	0	0
	d	All other revenue [Total. Add lines 11a-11d		0	0	0	0
	е 12	Total revenue. See instructions.	• • • • 🗲	3,544			
i		Oromas, Oco moductions, .		2,061,619	93,234	0	31,926

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon	se to any question i	in this Part IX		
	et include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	1,067,040	1,067,040		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	60,000	60,000		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
_	trustees, and key employees	0	0	0	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		_		
7	011	0	0	0	0
8	Pension plan accruals and contributions (include	150,710	143,013	. 0	7,697
J	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	0 2,398	0 2,322	0	<u>0</u> 76
10	Payroll taxes	11,530	10,941	0	589
11	Fees for services (non-employees):	11,530	10,941		
а	Management	o	اه	٥	0
b	Legal	4,855	0	4,855	0
С	Accounting	5,000	0	5,000	0
d	Lobbying	0	0	0,000	0
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	4,579	4,579	o	0
12	Advertising and promotion	8,895	0	0	8,895
13	Office expenses	34,130	502	4,340	29,289
14	Information technology	3,658	2,215	1,010	433
15	Royalties	0	0	0	0
16	Occupancy	0	0	. 0	. 0
17	Travel	44,215	44,215	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
10		0	0	0	0
19 20	Conferences, conventions, and meetings	0	0	0	0
21	Payments to affiliates		0	0	0
22	Depreciation, depletion, and amortization .	0 4,467	0 4,467	0	0
23	Insurance	12,145	9,105		
24	Other expenses. Itemize expenses not covered	12,145	9,105	3,040	0
	above (List miscellaneous expenses in line 24e. If				ļ
	line 24e amount exceeds 10% of line 25, column				!
	(A) amount, list line 24e expenses on Schedule O.)				
а	Room and Board	481,901	481,901	0	0
b	PK Program Expense	11,471	11,471	0	0
С	Course Expenses	29,383	29,383	0	0
d	Educational Publications	24,777	24,777	0	0
е	All other expenses	13,456	4,697	4,744	4,015
25	Total functional expenses. Add lines 1 through 24e	1,974,610	1,900,628	22,989	50,994
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here I if				
	following SOP 98-2 (ASC 958-720)	Ol	ol	o	0

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 1 108.841 1 158,599 2 2 706,225 755,749 3 3 0 0 7.228 4 7,249 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 0 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L. . . 6 0 7 254,000 254,000 8 8 n 9 Prepaid expenses and deferred charges . . . 9 10,239 9,629 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 77,112 Less: accumulated depreciation . . . 14,822 10c 10b 63,878 13,234 11 Investments—publicly traded securities 0 11 0 12 Investments—other securities. See Part IV, line 11. 0 12 0 13 Investments—program-related, See Part IV, line 11 13 750,000 750,000 14 14 0 Ő 15 98,354 15 144,122 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 16 1,999,233 2,043,058 17 Accounts payable and accrued expenses 22,788 17 24,715 18 18 o 0 19 Deferred revenue 19 0 0 20 20 ol 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 ol n Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 0 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 0 0 24 Unsecured notes and loans payable to unrelated third parties . . . 24 0 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 0 25 0 Total liabilities. Add lines 17 through 25 . . . 26 22,788 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 0 28 Temporarily restricted net assets 28 0 0 29 0 0 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 n Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 0 0 32 Retained earnings, endowment, accumulated income, or other funds. 32 1,976,445 2,018,343 Total net assets or fund balances 33 33 1,976,445 2,018,343 34 Total liabilities and net assets/fund balances . . . 34 1,999,233 2,043,058 Form 990 (2012)

_	4	•
Page	-1	4

. 0 55	0 (2012)			1 49	,
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u></u>		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,06	<u>1,619</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,974	4,610
3	Revenue less expenses. Subtract line 2 from line 1	3		87	7,009
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,970	<u>6,445</u>
5	Net unrealized gains (losses) on investments	5		-4	<u>5,110</u>
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		2,018	<u>8,344</u>
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>	<u></u>	• •	
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		4		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	- ,		
	Schedule O.				لــِــ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	19.	<u>✓</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or	-		7 2
	reviewed on a separate basis, consolidated basis, or both:				1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a		***************************************	
	separate basis, consolidated basis, or both:			113	-
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			***	ت ــــــــــــــــــــــــــــــــــــ
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or				
	of the audit, review, or compilation of its financial statements and selection of an independent according		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	cplain in	100		
	Schedule O.		, 1,	· 24 - (
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	torth in			
	the Single Audit Act and OMB Circular A-133?		3a		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ıudits	3b		
			Form	n 990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Maharis Part	hi Purusha Prog		rity Status (All orga	nization	e muet c	omplete	this na	rt) Soo i		24160		
			ition because it is: (Fo						11Structio	J115.		
_			hes, or association of		-		•	•).			
_	_		170(b)(1)(A)(ii). (Attac						•			
_			spital service organiza			section '	170(b)(1)	(A)(iii).				
4 [earch organizatione, city, and state	on operated in conjuncte.	ction with	a hospit	al descri	bed in se	ection 17	0(b)(1)(A)	(iii). Ente	r the	
5 [on operated for ()(1)(A)(iv). (Com	the benefit of a colle	ge or uni	versity ov	wned or	operated	by a go	vernmen	tal unit c	lescrib	ed in
	An organizatio	on that normally	nment or government receives a substantia (A)(vi). (Complete Par	al part of					nit or fron	n the ge	neral _l	public
8 [A community	trust described i	n section 170(b)(1)(A)(vi). (Cor	nplete Pa	ırt II)						
			receives: (1) more that				om contr	ibutions.	members	ship fees	and.	aross
	receipts from	activities related	d to its exempt funct	ions-sul	bject to d	certain e	xceptions	s, and (2)	no more	e than 3	31/3%	of its
			nt income and unre						n 511 ta	x) from	busin	esses
	•	-	fter June 30, 1975. Se					•				
_			operated exclusively			-						
11			nd operated exclusive blicly supported organ									
e [509(a)(3). Che a Type I By checking to ther than four section 509 If the organiz	b Type his box, I certify indation manage (a)(2). ation received a	describes the type of	supportir I-Functio is not co e or more	ng organiz nally integ ntrolled de publicly	zation an grated Iirectly oi support	d comple d r Indirectled organ	ete lines 1 Type III–N ly by one lizations o	1e through Non-funct or more described	gh 11h. tionally ir disqualif I in secti	ntegra led pe on 50	ted rsons 9(a)(1)
g	•	17, 2006, has t	he organization accep	pted any	gift or co	ontributio	n from a	any of the	• • •		•	· ⊔
	(i) A person v	who directly or i	ndirectly controls, eithody of the supported			her with	persons	describe	d in (ii) a	nd 11g(i	Yes	No
	(ii) A family m	ember of a person	on described in (i) abo	ove? .						11g(i		
	· · ·	-	a person described in		above? .					11g(iı		
h		-	on about the support								-1	
	ime of supported organization	(iı) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the orgai	ou notify nization in of your port?	organizat (i) organi	Is the tion in col zed in the S?	(vii) Amount of monetary		onetary
				Yes	No	Yes	No	Yes	No	1		
(A)												
(B)												
(C)												
(D)												
(E)												•

Total

	(Complete only if you checked the Part III. If the organization fails to				_	•	ality under
Secti	on A. Public Support				<u> </u>		
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	N/A					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	سخيم گدر.	9 7 3 4 1 M	भर्त कि कर रहीं		7.00 m 200.2	
6	Public support. Subtract line 5 from line 4.						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	N/A					
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 IV.)						
11	Total support. Add lines 7 through 10					` ` ` ` ` `	
12	Gross receipts from related activities, etc	. (see instruction	ons)			12	
13	First five years. If the Form 990 is for the	-			•		
	organization, check this box and stop he				· · · · ·	<u> </u>	· · 🕨 🔲
Secti	on C. Computation of Public Suppo					,	
14	Public support percentage for 2012 (line		-			14	<u>%</u>
15	Public support percentage from 2011 Sc					15	%
16a	331/a% support test—2012. If the organibox and stop here. The organization qua	ılıfıes as a publ	icly supported	dorganization			. ▶ 🗀
b	331/a% support test—2011. If the orga check this box and stop here. The organ	iization qualifie	s as a publicly	supported or	ganization		. ▶ □
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the " organization	ets the "facts- facts-and-circu	and-circumsta imstances" te	ances" test, che st. The organiz	eck this box ai ation qualifies	nd stop here. E as a publicly si	xplain in upported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part IV how the organization in supported organization	tion meets the neets the "facts	facts-and-cs-and-cs-and-creams	ircumstances" stances" test. T	test, check tl The organization	nis box and stoon qualifies as a	and line op here. publicly
18	Private foundation. If the organization d						_

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

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants ")	2,213,045	2,119,572	2,876,175	1,810,823	1,936,459	10,956,074
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the	:					
	organization's tax-exempt purpose	0	8,237	23,516	29,062	93,234	154,049
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the					1	
_	organization without charge	0	0	0	0	0	0
6 70	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3	2,213,045	2,127,809	2,899,691	1,839,885	2,029,693	11,110,123
1 a	received from disqualified persons .	254 204	445.405	270 244	474.040	222 242	4 400 000
L		251,801	145,135	279,241	171,910	280,943	1,129,030
b	Amounts included on lines 2 and 3 received from other than disqualified			}			
	persons that exceed the greater of \$5,000	i 1	İ	1			
	or 1% of the amount on line 13 for the year	o	o	o	0	o	0
C		251,801	145,135	279,241	171,910		1,129,030
8	Public support (Subtract line 7c from	20.,001	110,100	210/241	17.170,10	200,040	171207000
	line 6.)				7		9,981,093
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	2,213,045	2,127,809	2,899,691	1,839,885	2,029,693	11,110,123
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .	173,861	106,045	48,535	33,618	28,818	390,877
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975	_		_			
_	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business	173,861	106,045	48,535	33,618	28,818	390,877
"	activities not included in line 10b, whether						
	or not the business is regularly carried on	اه	0	ا	•	ام	•
12	Other income. Do not include gain or			0	0	0	0
	loss from the sale of capital assets						
	(Explain in Part IV.)	5,469	4,809	3,363	3,073	3,544	20,258
13	Total support. (Add lines 9, 10c, 11,	5,300	4,000	5,000		5,544	20,200
	and 12.)	2,392,375	2,238,663	2,951,589	1,876,576	2,062,055	11,521,258
14	First five years. If the Form 990 is for the	ne organization			, or fifth tax ye		n 501(c)(3)
	organization, check this box and stop he				· · · · ·	· · · · · ·	▶ 🗆
	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line		•	3, column (f))		15	86.63 %
16	Public support percentage from 2011 Sci			<u></u>		16	79.37 %
	on D. Computation of Investment In				(0)		
17	Investment income percentage for 2012 (•		17	3.39 %
18	Investment income percentage from 2013						4.16 %
19a	331/3% support tests – 2012. If the organ 17 is not more than 331/3%, check this box						·
ь	33 ¹ / ₃ % support tests—2011. If the organiz		-	-		•	
D	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di		-				

Schedule A (f	Form 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
credit card	rebates represented the total amounts in Part III line 12 for years 2008, 2009, 2010, 2011 and 2012	
•		
••••		
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		·

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047 20**12**

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

b. Open to Public Inspection
Employer identification number

Maharishi Purusha Program 56-1824160 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990. Part IV. line 6. (b) Funds and other accounts Total number at end of year N/A 2 Aggregate contributions to (during year). 3 Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . 2a N/A Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 \$____ Assets included in Form 990, Part X

Part	Organizations Maintaining	Collections of	Art, His	torical T	reasures	, or Ot	her Similar Ass	ets (cont	inue	<u>d) </u>
3	Using the organization's acquisition, collection items (check all that apply):		her reco	rds, chec	k any of th	e follov	ving that are a sig	ınificant u	se of	its
а	☐ Public exhibition		d	☐ Loan	or exchang	ge prog	rams			
b	☐ Scholarly research		е	☐ Other	_					
c	☐ Preservation for future generations	\$								
4	Provide a description of the organizat XIII.	tion's collections a	and expla	ain how th	ney further	the org	anızation's exem	ot purpose	e ın F	'art
5	During the year, did the organization	solicit or receive	donation	s of art,	historical t	reasure	s, or other similar			
	assets to be sold to raise funds rather	than to be mainta	uned as	part of the	organizat	ion's co	llection?	☐ Yes		No
Part	IV Escrow and Custodial Arra line 9, or reported an amour				anization	answe	red "Yes" to For	m 990, P	art I	7,
1a	Is the organization an agent, trustee included on Form 990, Part X?									— No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing ta	able:					
	•	·		Ū			Am	ount		
С	Beginning balance					10				_
d	Additions during the year					1d	1			
е	Distributions during the year					1e				_
f	Ending balance					1f				
2a	Did the organization include an amount	nt on Form 990, Pa	art X, line	21? .				☐ Yes		No
b	If "Yes," explain the arrangement in P	art XIII. Check here	e if the e	xplanation	n has been	provide	ed in Part XIII .			
Par	Endowment Funds. Compl		ation ar	nswered	"Yes" to I	orm 9	90, Part IV, line	10.		
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years back	(e) Four ye	ars ba	εk
_ 1 <u>a</u>	Beginning of year balance	- 754,382	-	754,382	•	754,382	754,382		75 <u>4,</u>	382
b_	-Contributions			0		0	. 0			0
С	Net investment earnings, gains, and									
	losses	40,320		40,320		40,320	39,689		60,	<u>351</u>
d	Grants or scholarships	0		0		0	0			0
е	Other expenditures for facilities and						•			
	programs	40,320		40,320		40,320	39,689		60,	351
f	Administrative expenses	0		0		0	0			0
g	End of year balance	754,382		754,382		754,382	754,382		754,	 382
2	Provide the estimated percentage of t	the current year en	d balanc	e (line 1g	, column (a	a)) held a	as:			
а	Board designated or quasi-endowment	nt ▶ 10	0%							
b	Permanent endowment ▶	0%								
C	Temporarily restricted endowment ▶									
	The percentages in lines 2a, 2b, and 2	c should equal 10	0%.							
3a	Are there endowment funds not in the	e possession of th	ne organı	zation tha	at are held	and ad	ministered for the			
	organization by:							Y	es N	lo
	(i) unrelated organizations							3a(i)		7
	(ii) related organizations							3a(ii)	٦,	7
b	If "Yes" to 3a(ii), are the related organ	izations listed as r	equired o	on Sched	ıle R? .			3b		_
4	Describe in Part XIII the intended uses	s of the organization	on's endo	owment fu	ınds.					_
Part	VI Land, Buildings, and Equip	ment. See Form	1 990, P	art X, line	e 10.					
	Description of property	(a) Cost or ot (investment)			r other basis ther)		Accumulated epreciation	(d) Book v	alue	_
1a	Land									—
b	Buildings	•				- month of the	27412740			_
C	Leasehold improvements									—
ď	Equipment			<u> </u>	17,697		9,000		Ω.	697
е	Other				59,415		54,878	· · ·		537
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90. Part	X. column		D(c).)	34,676			234
				,	1-7,	177		ule D (Form		

Part VII Investments—Other Securities	See Form 990, Part X, I	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value Cost or end-of-year m	
(1) Financial derivatives	0		
(2) Closely-held equity interests	0		
(3) Other	0		
(A)			
(B)			
(C) (D)			
(E)			
(F)			
(G)			
(H)			
(l)	_		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	0		
Part VIII Investments - Program Related	J. See Form 990, Part X,	line 13.	
(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Loans to Global Capital of World Peace, Inc	750,000	cost	
(2)			
(3)			
(4)			<u> </u>
(5)	<u> </u>		
(6)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	750,000		
Part IX Other Assets. See Form 990, Pa	rt X, line 15.		
(a	a) Description		(b) Book value
(1) Metals			144,122
(2)			
(3)			
(4)			
_(5) _(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, co			144,122
Part X Other Liabilities. See Form 990,			
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2) N/A (3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
			,
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶ 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the t	0		

scheau	e D (Form 990) 2012		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		2 3
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	7
С	Recoveries of prior year grants	2c	7
d	Other (Describe in Part XIII.)	2d	7
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	1
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses pe	er Return
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	2a	No.
b	Prior year adjustments	2b	7 . 1
С	Other losses	2c	7, 7,
d	Other (Describe in Part XIII.)	2d	╡.
e			2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line-7b	4a -	-
b-	Other (Describe in Part XIII:)	4b	
C	Add lines 4a and 4b		- 4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5
Part			
	lete this part to provide the descriptions required for Part II, lines 3, 5, and	Q: Part III lines 1a and 4: E	Part IV lines 1h and 2h:
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	o provide any additional
	ation.	. 7.00 complete the part to	o provide any additionar
The en	dowment was created by the Board of Directors to help achieve the program gr	nais and the Board has com	aplete discretion in
	downless was dicated by the board of birectors to help achieve the program di	oars and the Board has com	ipiete discretion in
etm icti	ring how the funds raised or accrued are used to achieve its program goals. TI	he andoument may be inves	stad in any type of income
Suucu	and now the funds raised of accided are used to achieve its program goals. If	ne endownent may be nives	sted in any type of income
aradıı	ing vehicle, including loans, bonds, equities, saving accounts, or other income		shotosan tormo the Donal
JI 00ut	ing venicle, including loans, bonds, equities, saving accounts, or other income	e producing venicles over w	matever terms the Board
of Dire	ctors feels is appropriate. The endowment may also be invested in the constru	ction of permanent facilities	s for the use of the
organi	zation as a home for the programs offered by the organization.		
			•••••

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Maharishi Purusha Program 56-1824160 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other 1 assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the ✓ Yes □ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, (b) Number of offices in the (a) Region (c) Number of (e) If activity listed in (d) is (f) Total expenditures for a program service, describe specific type of service(s) in region employees, agents, and region and investments independent in region contractors grants to recipients located in the region) in region (1) South Asia 0 70 program services deep meditation 827,362 (2) North America 0 6 program services deep meditation 60,000 -(3)_{=Europe} program services deep meditation 47,005 (4) (5) (6)(7) (8) (9) (10)(11)(12)(13)(14)(15) (16)(17)Sub-total 0 81 934,367 Total from continuation sheets to Part I

0

c Totals (add lines 3a and 3b)

0

81

0

934,367

Page 2

Schedule F (Form 990) 2012

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, book (h) Description of non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. 0 N/A (g) Amount of non-cash assistance (f) Manner of cash disbursement by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 60,000 wire (e) Amount of cash grant (d) Purpose of grant general support Enter total number of other organizations or entities North America (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization Part II (16) 9 £ (12) 33 ₹ 4 15) N က <u>2</u> <u>ෆ</u> 3 2 9 E 8 6

Schedule F (Form 990) 2012

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. 'Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2012

Part III Grants at

Part III can be duplica	Part III can be duplicated it additional space is needed.	is needed.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) N/A							
(2)							
(6)							
(4)							!
(5)				-			
(9)							
(2)				<u>.</u>			
(8)							į
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)		-					
(17)				-			
(18)							
						Sche	Schedule F (Form 990) 2012

Page	-

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		-
	<u>"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)</u>	☐ Yes	☑ No

Part V

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

Our organization has a Grant Agreement prepared by legal counsel which any Grantee organization must sign which outlines the
procedures for obtaining grants from our organization. These procedures include a form for Grantee to fill out requesting a Grant from us
If Grantee intends to Grant any of the funds we Grant to them to any other organization they must submit with their Grant Request a Grant
Request of the Secondary Grantee that binds the Secondary Grantee to the same terms and conditions to which the Grantee is bound under
our Grant Agreement. The Grant Agreement requires the Granted funds are to be used by the Grantee solely for the purposes described in
the Grant Request. Some of the terms and conditions the Grantee must perform include: written progress reports stating clearly what portion
of the Grant Request has been expended during the reporting period and the purposes for which they have been expended; 30 days after
expenditure and Annual Reports are required detailing use of the Granted Funds clearly segregated by Grant if more than one Grant was
received during the reporting period; any Secondary Grants made by Grantee shall be reported to Grantor by Grantee as required by the
Grant Agreement; at any time within 90 days of request from the Grantor the Grantee shall provide the Grantor with a report prepared by the
Grantee's regular independent auditor setting forth complete financial details of Grantee's administration of the Grant including a statement
showing the actual disbursements made, to whom such disbursements were made, and the purposes for which the recipient used the Grant
Funds; Grantee agrees Grantor at its discretion may send representatives who shall have complete access to Grantee's files and books and
records for the purpose of making a financial audit; Grantor has the right to, in its absolute discretion, withdraw its approval of any Grant
Request at any time and refuse to make any Fund Grants pursuant to any Grants Request or otherwise render financial assistance to or for
any or all of the purposes for which the Grantee has Requested Grant Funds, and in the case of any unapproved use of the Grant Funds by
the Grantee, demand return of, and receive in return, all then un-expended Grant Funds and reimbursement for all Grant Funds expended
for any unapproved purpose.
Part II, Question 1 asks us to mention the method we use to account for these Grants on our financial records. You will find each of these
Grants listed for each of the organizations receiving them under the expense category "Contributions to other non-profit". Each
organization receiving a Grant has its own chart of account number in this section.

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

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Employer identification number

OMB No. 1545-0047

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, **%**□ (h) Purpose of grant or assistance support purposes support purposes support purposes support purposes ✓ Yes 56-1824160 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. N/A N/A N/A ¥ (e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. book book book 0 book . Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 102,215 (d) Amount of cash 178,126 549,700 237,000 grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 501 (c) (3) 501 (c) (3) 501 (c) (3) 501 (c) (3) 04-3351250 27-1003036 36-4519393 20-5981141 (p) EIN (3) Global Capital of World Peace,I (4) Howard&Alice Settle Foundation 100 Old North Branch Rd, Antrim NH 1 (a) Name and address of organization (2) Global Country of World Peace 1000 Purusha Place, Romney WV (1) Maharishi Vedic Foundation 2000 Capital Blvd, Fairfield Iowa 1537 Bull Lea Rd, Lexington, KY Maharihi Purusha Program or government Partl Part II Ø (9) 8 6 9 **E** E

Schedule I (Form 990) (2012)

Cat. No. 50055P

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

Page 2

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012) (f) Description of non-cash assistance To monitor the use of the funds we confirm that the receiving organization is a 501 (c) (3) organization and that the organizations goals are consistent with ours. Also, a member of the Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional (e) Method of valuation (book, FMV, appraisal, other) Board of Trustees is assigned to confirm the use of the funds with the donee organization and report back to the Board. (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance information. Part III 4 N Part IV က ល ဖ

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Employer identification number

Mahari	shi Purusha Program				ł	56-182416	60		
Part	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash con amounts repo Form 990, Part	orted on	Method o			
1	Art—Works of art								
2	Art—Historical treasures								
3	Art—Fractional interests								
4	Books and publications								
5	Clothing and household								
•	goods				}				
6	Cars and other vehicles					_			
7	Boats and planes				- 1				
8	Intellectual property								
9	Securities—Publicly traded	/	11		47 489	sales price			
10	Securities—Closely held stock .				47,405	Sales price			
11	Securities—Partnership, LLC,								
••	or trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation							-	
	_contribution_Historic							-	 =
	structures		•						
14	Qualified conservation						_		
	contribution—Other								
15	Real estate—Residential								
16	Real estate—Commercial	· · · ·				-			
17	Real estate—Other	\							
18	Collectibles					<u> </u>			
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► (Banner)	─ ✓	1		70	actual cost			
26	Other ► (Gold Coins)	<u> </u>	2			market value			
27	Other ► ()	<u> </u>			00,070	market value			
28	Other (-			
29	Number of Forms 8283 received	by the or	ganization during the tax	vear for contrib	utions for				
	which the organization completed					29	0		
					'			Yes	No
30a	During the year, did the organiza	tion receive	by contribution any prop	erty reported in	Part I. lines	s 1-28 that			
	it must hold for at least three year								
	used for exempt purposes for the						30a		/
b	If "Yes," describe the arrangemen		- :						
31	Does the organization have a		stance policy that require	es the review	of anv no	n-standard			
	contributions?						31	1	<u> </u>
32a	Does the organization hire or us						<u> </u>		
	contributions?						32a		1
b	If "Yes," describe in Part II.				• •	· · ·	520		
33	If the organization did not report a	n amount ir	column (c) for a type of pro	operty for which	column (a) i	is checked.			
	describe in Part II.			.,,					

Part II	Form 990) (2012) Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b,
. a. c	and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the
	number of items received, or a combination of both. Also complete this part for any additional information.
	Trainbor of Rollie Foodivod, of a complete sine part of any administrative
• • • • • • • • • • • • • • • • • • • •	
	<u></u>

SCHEDULE N

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Assets
on of
nt Disposition of Assets
gnificant
or Si
ation, Dissolution, or Significant Disposit
ermina
Liquidation, T

► Complete if the organization answered "Yes" to Form 990, Part IV, lines 31 or 32; or Form 990-EZ, line 36. Attach certified copies of any articles of dissolution, resolutions, or plans.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

ž Liquidation, Termination, or Dissolution. Complete this part if the organization answered "Yes" to Form 990, Part IV, line 31, or Form 990-EZ, line 36. (g) IRC section of recipient(s) (if tax-exempt) or type of entity Yes Employer identification number 8 ည္က Sa 56-1824160 (f) Name and address of recipient Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution? If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III. (e) EIN of recipient Become an employee of, or independent contractor for, a successor or transferee organization? (d) Method of determining FMV for asset(s) distributed or transaction expenses Become a direct or indirect owner of a successor or transferee organization? Did or will any officer, director, trustee, or key employee of the organization: (c) Fair market value of asset(s) distributed or amount of transaction expenses Become a director or trustee of a successor or transferee organization? Part I can be duplicated if additional space is needed. (b) Date of distribution (a) Description of asset(s) distributed or transaction expenses paid Maharishi Purusha Program Name of the organization Part æ e None Ω ပ

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

Cat. No. 50087Z

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

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

	SS No	-	_	L			_		wered	on of (if r type	3)	3)	3)	3			S No		>	>		
	Yes	ဗ	4 a	4b	2	6a	q9		ก สทรา	(g) IRC section of recipient(s) (if tax-exempt) or type of entity	501 (c) (3)	501 (c) (3)	501 (c) (3)	501 (c) (3)			Yes	2a <	2p	2c	5d	
1	26	<u>ــ</u>	<u>. </u>	<u>. </u>	L	<u>. </u>	_	1	nizatio	(g) re tax-e	ر می	ιń	ŭ	ιń				* `		<u>.</u> .	<u> </u>	
	(Total assets), and line		iquidate, or terminate?			•	Did the organization discharge or defease all of its tax-exempt bond liabilities during the tax year in accordance with the Internal Revenue Code and state laws?	plain in Part III.	s. Complete this part if the organization answered pace is needed.	(f) Name and address of recipient	Global Capital of World Peace, Inc. 1000 Purusha Place Romney, WV	Global Country of World Peace 2000 Capital Blvd Fairfield Iowa	Maharishi Vedic Foundation P.O.Box 670 Fairfield Iowa	Howard&Alice Settle Foundation 1537 Bull Lea Rd Lexington KY							disposition of assets?	
), Part X, column (B), line 16	," describe in Part III	is intent to dissolve, I				accordance with the	labilities. If "No," ex	ganization's Asset	(e) EIN of recipient	27-1003036	36-4519393	04-3351250	20-5981141					اخ		nization's significant	
	ear, then Form 990,	instrument(s)? If "No	iate state official of it	•	h state laws?	ear?	during the tax year ir	herwise settled these	nsfer of More Than 25% of the Organization's Assets. Complete thi 990-EZ, line 36. Part II can be duplicated if additional space is needed	(d) Method of determining FMV for asset(s) distributed or transaction expenses	102,215 cash and cost	Cash	Cash	Cash				•	ınsferee organızation	m?	s a result of the orga	
(continued)	sets during the tax)	nce with its governing	neral or other appropr		ies in accordance with	tstanding during the y	exempt bond liabilities	zation defeased or ot	ransfer of More Th n 990-EZ, line 36. P		102,215	549,700 Cash	178,126	237,000 Cash			of the organization	feree organization?	for, a successor or tra	transferee organizatio	ıer similar payments a	
or Dissolution	ed all of its as:	ssets in accordar	y the attorney ge	le such notice?	ay all of its liabilit	xempt bonds ou	ease all of its tax	III how the organ	on, or Other T line 32, or Forr	(b) Date of distribution	various	various	various	various			olame vex an od	ce, or key emplo	ndent contractor	of a successor or	npensation or oth	
Liquidation, Termination, or Dissolution (continued)	Note. If the organization distributed all of its assets during the tax year, then Form (Total liabilities), should equal -0	Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III	Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?	If "Yes," did the organization provide such notice?	Did the organization discharge or pay all of its liabilities in accordance with state laws?	Did the organization have any tax-exempt bonds outstanding during the year?	Jid the organization discharge or de	If "Yes" to line 6b, describe in Part III how the organization defeased or otherwise settled these liabilities. If "No," explain in Part III	Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this "Yes" to Form 990, Part IV, line 32, or Form 990-EZ, line 36. Part II can be duplicated if additional space is needed.	(a) Description of asset(s) disinbuted or transaction expenses paid							Oid or will any officer director thistee or key employee of the organization:	Become a director or trustee of a successor or transferee organization?	Become an employee of, or independent contractor for, a successor or transferee organization?	Become a direct or indirect owner of a successor or transferee organization?	Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?	
Part	<u> </u>	8	4a	<u> </u>	2	6a [٩	v	Part II	-	Cash	Cash	Cash	Cash			,	æ	ō	υ Ш	ם	

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Pa	a	e	•

Four of the Nine members of the Board of Trustees of Maharishi Durusha Program are also members of the Board of Trustees of Global Capital of World Peace, Inc., They are Howard Chandler, Rafael David, Bevan Morris and John Hagelin, Bevan Morris and John Hagelin are also Trustees of Global Country of World Peace.	Part III	II, line 2e. Also complete this part to provide any additional information.
also Trustees of Global Country of World Peace.	Four of the	Nine members of the Board of Trustees of Maharishi Purusha Program are also members of the Board of Trustees of Global
	Capital of V	Norld Peace, Inc. They are Howard Chandler, Rafael David, Bevan Morris and John Hagelin. Bevan Morris and John Hagelin are
	also Truste	ees of Global Country of World Peace.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

<u>56-1824160</u>
ada. We also supported numerous
participants practiced the TM and
Many of these participants reported
g through them as they gained more
prepare materials for the
sonnel the 990 is sent to all members
d an officer signs the signature page
······
e's site for review and downloading.
vailable a copy of our 990 for
neral public.
nesota, Mississippi, Alabama, Florida,
ode Island, South Carolina, Tennessee,
on DC
stant Treasurer and the Accounts
nder the Conflict of Interest Policy. Any
on of the President by the Assistant

Schedule O (Form 990 or 990-EZ) (2012)	Page Z
Name of the organization Maharishi Purusha Program	Employer identification number 56-1824160
determined by a review of the Finance Committee in light of his duties and respo	nsibilities. The President reviews the decisions of the
Finance Committee and if there is any question about any compensation a full re	view by the Board of Trustees is done.
Additional response to Form 990, Part VI, 4:	
The organization added 2 voting members to the Board of Trustees. The new men	nbers are Jeffrey Irvine and Rıchard Larsen.
Additional response to Form 990, Part XI, 5:	
The unrealized loss on investments related to the current value of precious metal	s hains hald by the organization
The unrealized loss off investments related to the current value of precious meta	5 being nero by the organization.