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Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

For calendar year 2010, or tax year beginning and ending G Check all that apply initial return initial return of a former public charity Final return Amended return Address change Name change A Employer identification number Name of foundation 47-0828994 COURSE IN MIRACLES SOCIETY Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 200 7602 PACIFIC STREET 402-391-2400 City or town, state, and ZIP code C If exemption application is pending, check here 68114-5405 OMAHA, NE D 1. Foreign organizations, check here Foreign organizations meeting the 85% test check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated X Cash I Fair market value of all assets at end of year | J | Accounting method under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) F If the foundation is in a 60-month termination 181,177. (Part I, column (d) must be on cash basis.) **▶**\$ under section 507(b)(1)(B), check here Part | Analysis of Revenue and Expenses (d) Disbursements for chantable purposes (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income re) (cash basis only) 12,876. Contributions, gifts, grants, etc., received Check ▶ if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) 62 Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all assets on line 6a OGDEN 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances STATEMENT 68,391. STATEMENT 37,026. D Less Cost of goods sold 31,365 31,365 c Gross profit or (loss) 11 Other income 44,241 0. 31,365 Total. Add lines 1 through 11 0. 0. 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees 3,373. STMT 3 7,150. 0. 3,777. b Accounting fees c Other professional fees 17 Interest 18 Taxes 75. 0. 75. 19 Depreciation and depletion 527. 0. 0. 527. 20 Occupancy 635. 0. 0. 635. 21 Travel, conferences, and meetings 22 Printing and publications STMT 4 35,182. 0. 27,917. 7,265. 23 Other expenses 24 Total operating and administrative 43,569. 0. 31,365. 12,204. expenses. Add lines 13 through 23 1,274. 1,274. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 44,843. 0. 31,365. 13,478. Add lines 24 and 25 27 Subtract line 26 from line 12 -602.2 Excess of revenue over expenses and disbursements Ō. b Net investment income (if negative, enter -0-) 0. c Adjusted net income (If negative, enter -0-)

Forr	n 99	0-PF (2010) COURSE IN MIRACLES SOCIE	TY	47-0828994 Page 2			
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of yea			
P	art	Balance Sheets Alacheo scredules and amounts in the description column should be for end-of-year amounts only	(a) Book Value		c) Fair Market Value		
	1	Cash - non-interest-bearing	20,219.	12,269.	12,269 <u>.</u>		
	2	Savings and temporary cash investments					
		Accounts receivable ►	, , , , , , , , , , , , , , , , , , , ,		,,		
		Less allowance for doubtful accounts		-			
	4	Pledges receivable					
- 1	7	Less allowance for doubtful accounts		1			
	5	Grants receivable	-				
	-						
i	6	Receivables due from officers, directors, trustees, and other					
	_	disqualified persons .			······································		
	7	Other notes and loans receivable		1			
	_	Less allowance for doubtful accounts ▶	65,072.	72,445.	168,708.		
Assets	8	Inventories for sale or use	03,072.	12,113.	100,700.		
SS	9	Prepaid expenses and deferred charges					
`		Investments - U S and state government obligations					
		Investments - corporate stock					
	C	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other			 		
	14	Land, buildings, and equipment basis 373.					
		Less accumulated depreciation STMT 5 > 187.	261.	186.	200.		
	15	Other assets (describe ►					
- 1							
ŀ	16	Total assets (to be completed by all filers)	85,552.	84,900.	181,177.		
	17	Accounts payable and accrued expenses .					
	18	Grants payable					
	19	Deferred revenue					
Ë∣	20	Loans from officers, directors, trustees, and other disquallfied persons					
= 1	21	Mortgages and other notes payable					
	22	Other liabilities (describe ► STATEMENT 6)	88.	38.			
	23	Total liabilities (add lines 17 through 22)	88.	38.	,		
\dashv		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
es	24	Unrestricted .					
2	25	Temporarily restricted					
-	26	Permanently restricted					
B	20	Foundations that do not follow SFAS 117, check here					
֡֡֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֡֓֓֡֞֞֡֡֡		,					
5		and complete lines 27 through 31.	0.	0.			
ş	27	Capital stock, trust principal, or current funds	0.	0.			
SS	28	Paid-in or capital surplus, or land, bldg , and equipment fund	85,464.	84,862.			
¥	29	Retained earnings, accumulated income, endowment, or other funds	85,464.	84,862.			
ž	30	Total net assets or fund balances	03,404.	04,002.			
Ì			05 552	84,900.			
\Box	31	Total liabilities and net assets/fund balances	85,552.	04,500.			
P	art	Analysis of Changes in Net Assets or Fund Ba	alances				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30				
		st agree with end-of-year figure reported on prior year's return)		. 1	85,464.		
	•	r amount from Part I, line 27a		. 2	-602.		
		r increases not included in line 2 (itemize)		3	0.		
-		lines 1, 2, and 3		. 4	84,862.		
		rescent not included in line 2 (itemize)		5	0.		

6

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV	(a) List and descri	be the kind	ses for Tax on in (s) of property sold (e g common stock, 200 shs	, real estate,	t Income	` P	How ac - Purc) - Dona	hase		e acquired day, yr)	(d) Date sold (mo , day, yr)
1a										_	
<u>b</u>	NON	IE				-					
<u> </u>						-					
d						+					
(e)	Gross sales price		preciation allowed or allowable)	, , , , ,	st or other basis expense of sale					Gain or (loss) us (f) minus (
a											
b		_									
C											
_d					· · · · · · · · · · · · · · · · · · ·		<u> </u>				
<u>e</u>					10/04/00						
Comple	ete only for assets showing			ĭ			ł	C	(I) Gains of (k) bu	(Col. (h) gain t not less thar	minus 1 -0-1 or
(I) F N	M V as of 12/31/69		Adjusted basis s of 12/31/69		cess of col (I) col (J), If any		COI (K			s (from col (h))
<u>a</u>											
_ <u>b</u>				_			ļ				
								-			
_d					···		<u> </u>				
<u>e</u>				<u></u> -							
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7				}	2						
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) if gain, also enter in Part I, line 8, column (c)				J							
If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net				<u> </u>	3	L	_				
If "Yes," the	undation liable for the section	y under se	ction 4940(e) Do not co	mplete this pa	ırt				· · · · · -		Yes X No
1 Enter to	ne appropriate amount in ea	ich column		uctions belote	making any enti				T		(d)
Calendar	Base period years r year (or tax year beginning	a (n)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncha		use asset	s	Distrib (col (b) div	(d) ution ratio ided by col (c))
- Guiondui	2009	9/	···	4,289.			1	7,59	8.		.24372
	2008			1,575.				6,16			.04354
	2007			1,666.				8,48			.09012
	2006			991.				8,86			.052523
	2005			1,387.		_		7,90	7.		.175414
	line 1, column (d)								2		.605332
	distribution ratio for the 5- ndation has been in existence			on line 2 by 5,	or by the number	r of ye	ears		3		.121066
4 Enter the	e net value of noncharitable	e-use asset	ts for 2010 from Part X,	line 5					4		13,087
5 Multiply line 4 by line 3				5		1,584					
6 Enter 1%	% of net investment income	e (1% of Pa	art I, line 27b)	•					6		0
7 Add line	es 5 and 6								7		1,584
0 Fatar au	ualifying distributions from	Part XII fin	no 4						8	1	13,478

Ori	n 990-PF (2010) COURSE IN MIRACLES SOCIETY							0828			Page 4
Pi	art VI Excise Tax Based on Investment Income (Section 494	0(a),	494	40(b), 4	1940(e),	or 4	948 -	- see	instrı	ıctio	ns)
18	a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e	nter "N/	/A" o	n line 1)						
	Date of ruling or determination letter (attach copy of letter if ne										
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► [X]	and	d enter 19	6 P		1				0.
	of Part I, line 27b										
` (: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	6 of Par	rt I, I	ine 12, co	ol (b) 丿						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only O	thers er	nter	-0-)			2				0.
3	Add lines 1 and 2						3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	Others e	nter	-0-)		-	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	•					5				0.
6	Credits/Payments	1	1								
	a 2010 estimated tax payments and 2009 overpayment credited to 2010	<u>6a</u>	+								
	Exempt foreign organizations - tax withheld at source	6b	╁								
0	: Tax paid with application for extension of time to file (Form 8868)	60	<u> </u>								
	I Backup withholding erroneously withheld .	6d									•
7	Total credits and payments. Add lines 6a through 6d						7				0.
8	Enter any penalty for underpayment of estimated tax. Check here Life Form 2220 is atta	ched					8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				1		10				
11					Refunde	d ►	11				
	art VII-A Statements Regarding Activities								Т	137	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation o	or dic	d it partic	pate or inte	ervene	ın			Yes	No
	any political campaign?							•	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo								<u>1b</u>	ļ	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copie	es o	f any ma	tenals pui	blishe	d or		İ		
	distributed by the foundation in connection with the activities.										1
	Did the foundation file Form 1120-POL for this year?					• •	-		1c	ļ	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	-				^					
	(1) On the foundation > \$ (2) On foundation managers					0.	-				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expending	iture tax	(Imp	posed on	foundation	l					
_	managers ▶\$									}	٠,
2	Has the foundation engaged in any activities that have not previously been reported to the II	RS?							2	ļ	X
_	If "Yes," attach a detailed description of the activities.										
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in		ent,	articles o	t incorpora	tion, c	or		1.		v
4-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change								3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ΙZ					M	/A	4 <u>a</u>		
	If "Yes," has it filed a tax return on Form 990-T for this year?	,		-			IA	<i>/</i> A	4b	<u> </u>	х
Ð	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	• ••	-					•	5		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied el	thor							İ		
U	By language in the governing instrument, or	11161.									
	By state legislation that effectively amends the governing instrument so that no mandator	v direct	'Annc	that oon	fliot with th	a etate	law			ļ	
	remain in the governing instrument?	y uneci	10115	illat Cuil	IIICE WIEIT EII	e State	iaw		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?								7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.			•	•						
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨		NONE	Ξ						
					-						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttornev	Gen	eral (or o	esignate)						
_	of each state as required by General Instruction G? If "No," attach explanation	,		(0. 0	- 3.8				8b	х	Ì
9	Is the foundation claiming status as a private operating foundation within the meaning of se	ction 49	9421	(i)(3) or 4	942(I)(5) fo	or cale	ndar		1		
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," c				0/1-7 **				9	Х	1
10 Did any persons become substantial contributors during the tax year? If 'Yes' attach a schedule listing their names and addresses						10		X			

Form **990-PF** (2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	niy	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of se	ervice	(c) Compensation
NONE		
	·	-
Total number of others receiving over \$50,000 for professional services	•	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the		
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1		
SEE STATEMENT 8		27,917.
		21/32/1
2		
3		
4		
D. HV D. O. C. D. L.	!	
Part IX-B Summary of Program-Related Investments		A
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	ındatıons, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	13,286.
C	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	13,286.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	13,286.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	199.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	13,087.
6	Minimum investment return. Enter 5% of line 5	6	654.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here X and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI) . 2b		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		12 470
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	13,478.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	13,478.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b .	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,478.
	Note: The amount on line 6 will be used in Part V. column /h\ in subsequent years when calculating whether the foundation	qualifies for the	section

Form **990-PF** (2010)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (s	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2009	2009	2010
1 Distributable amount for 2010 from Part XI,	, ,,			
line 7				-
2 Undistributed income, If any, as of the end of 2010				
a Enter amount for 2009 only				
b Total for prior years				
				111111111111111111111111111111111111111
3 Excess distributions carryover, if any, to 2010				
a From 2005				
b From 2006				
s From 2007 .				
d From 2008				
e From 2009				
f Total of lines 3a through e				
4 Qualifying distributions for 2010 from				
Part XII, line 4 ► \$				
a Applied to 2009, but not more than line 2a	'. ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;		<u> </u>	
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)		. ' '''!:	*************************************	
d Applied to 2010 distributable amount				
e Remaining amount distributed out of corpus		····	+	
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount				
must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract				
line 4b from line 2b				
c Enter the amount of prior years'	***************************************			
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed				
d Subtract line 6c from line 6b Taxable				
amount - see instructions				
e Undistributed income for 2009 Subtract line				
4a from line 2a Taxable amount - see instr				
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must	,			
be distributed in 2011				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a		ļ		
O Analysis of line 9.				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

Forn	m 990-PF (2010) COUR	SE IN	MIRACLES	SOCIETY			47-082	3994 Page 10
Pa	art XIV Private Operati	ng Fou	ndations (see ins	tructions and Part VII-	A, question 9)			
1 a	a If the foundation has received a r	ruling or de	termination letter that	it is a private operating				
	foundation, and the ruling is effec	ctive for 20	10, enter the date of th	he ruling	▶	02/0	9/01	
t	b Check box to indicate whether the		•	=	section	X 49	42(j)(3) or 4942	(j)(5)
	a Enter the lesser of the adjusted n		Tax year	<u></u>	Prior 3 year			<u></u>
	income from Part I or the minimu		(a) 2010	(b) 2009	(c) 2008		(d) 2007 -	(e) Total
	investment return from Part X for		<u></u>					
		'	0.	0.	1 -	808.	924.	2,732.
	each year listed	<u> </u>	0.	0.	1	537.	785.	2,322.
	b 85% of line 2a	.,,,	· ·		<u> </u>	337.	703.	2,522.
C	c Qualifying distributions from Part	txII,	12 470	4,289.	1	575.	1,666.	21,008.
	line 4 for each year listed	<u> </u>	13,478.	4,209.	1,	373.	1,000.	21,000.
d	d Amounts included in line 2c not							
	used directly for active conduct o	of						0
	exempt activities		0.	0.		0.	0.	0.
е	e Qualifying distributions made dire	ectly						
	for active conduct of exempt active	vities				1		
	Subtract line 2d from line 2c		13,478.	4,289.	1,	575.	1,666.	21,008.
3	Complete 3a, b, or c for the							
_	alternative test relied upon							
а	a "Assets" alternative test - enter (1) Value of all assets		81,597.	85,628.	73,	739.	73,444.	314,408.
	, ,	· ·	01,00.0	00,0200	,	 	,	
	(2) Value of assets qualifying under section 4942(j)(3)(B)(<i>γ</i> ι	81,597.	85,628.	73.	739.	73,444.	314,408.
ь	b "Endowment" alternative test - ent	• • • • • • • • • • • • • • • • • • • •	01/33/4	0370200	,			022,200
ш	2/3 of minimum investment retur							
	shown in Part X, line 6 for each y							0.
	listed							0.
C	c "Support" alternative test - enter							
	(1) Total support other than gros							
	investment income (interest,							
	dividends, rents, payments o securities loans (section	on						
	512(a)(5)), or royalties)							0.
	(2) Support from general public							
	and 5 or more exempt	į						
	organizations as provided in							0.
	section 4942(j)(3)(B)(iii)							
	(3) Largest amount of support for	10111						0.
	an exempt organization	<u> </u>		0.		786.	0.	786.
-	(4) Gross investment income		0.					
12	art XV Supplementary	intorm	ation (Complet	te this part only i	i the lound	aation na	ad \$5,000 or filor	e III assets
	at any time dur	ing the	year-see the ii	nstructions.)				
1	Information Regarding Four							
а	a List any managers of the foundat				ibutions receive	d by the fou	indation before the close	of any tax
	year (but only if they have contrib	buted more	than \$5,000) (See se	ection 507(d)(2).)				
NO)NE							
t	b List any managers of the foundat	tion who ov	wn 10% or more of the	e stock of a corporation (or an equally lar	ge portion o	of the ownership of a part	nership or
	other entity) of which the foundat							
NO	NE							
2	Information Regarding Con	tribution.	Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:			
-	Check here ► X if the found					d does not :	accent unsolicited reques	ts for funds. If
	the foundation makes gifts, grant							
	<u> </u>							<u>_</u> :.
2	a The name, address, and telephon	ie ilumber	oi die person to whon	n applications should be a	300162260			
t	b The form in which applications st	hould be su	ubmitted and informat	ion and materials they sh	only include.			
C	c Any submission deadlines:							
_	d. Anii maturationa ar limitationa an	awarde a	inh an hu annaranhina	Largae charitable fields	kinde of inctituti	one or othe	ar factore	

Part XV Supplementary information				<u> </u>
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year	or substantial contributor	recipient		
SEE STATEMENT 9		<u> </u>	<u> </u>	1,274.
Total b Approved for future payment			33	1/2/4.
NONE				
Total	<u> </u>	<u> </u>	▶ 3h	

Part XVI-A	Analysis of Income-Pro	ducing Activities
Enter gross amounts	unless otherwise indicated	Unrelated business income

Enter gross amounts unless otherwise indicated	Unrelat	ed business income		ided by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	Code	-			
b			\vdash		
C					
d					
e					
f					
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments 3 Interest on savings and temporary cash		<u> </u>	-		
Investments			1		
4 Dividends and interest from securities	-				
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal	-				
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory		,	ĺ		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					31,365.
11 Other revenue					
a					
b			<u> </u>		
C			<u> </u>		
d			<u> </u>		
e					
12 Subtotal Add columns (b), (d), and (e)	<u> </u>	0.	L	l	31,365.
13 Total. Add line 12, columns (b), (d), and (e)				13	31,365.
(See worksheet in line 13 instructions to verify calculations)		 			
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom			contri	outed importantly to the acc	omplishment of
the foundation's exempt purposes (other than b			TAT	MIDACIDOU	UITOU TO AN
10 SALE OF PUBLISHED MATER			TIV	MIRACLES W	HICH IS AN
EDUCATIONAL RESEARCH AN	D STUD	Y ALD			·
					
					
					
					
					
	_				
		· <u>-</u>		······································	
				<u> </u>	
023621 12-07-10					Form 990-PF (2010)

Part XVII	Information Regarding	Transfers To and	Transactions and	Relationships With	n Noncharitable
	Exempt Organizations				

		Exempt Organ	<u> </u>					
1	Did the or	ganization directly or indi-	rectly engage in any of the followin	ig with any other organization	n described in section 501(c) of		Yes	<u>No</u>
	the Code	(other than section 501(c))(3) organizations) or in section 52	27, relating to political organi	zations?			
3	Transfers	from the reporting found:	ation to a noncharitable exempt or	ganization of				
	(1) Cash			•		1a(1)	`	<u>X</u>
	(2) Other	r assets				1a(2)		X
b	Other tran	sactions					- 1	
	(1) Sales	of assets to a noncharital	ble exempt organization	÷		1b(1)		<u>X</u>
			ncharitable exempt organization			1b(2)		Х
		al of facilities, equipment,				1b(3)		Х
	• •	bursement arrangements				1b(4)		X
		s or loan guarantees				. 1b(5)		X
	• •	=	mbership or fundraising solicitation	ons .		1b(6)		X
C	Sharing o	f facilities, equipment, ma	iling lists, other assets, or paid em	ployees		10		X
d	-		-		ays show the fair market value of the goods	, other asse	ts,	
	or service	s given by the reporting fo	oundation. If the foundation receiv	ed less than fair market value	e in any transaction or sharing arrangement	, show in		
	column (d	i) the value of the goods,	other assets, or services received					
a)L	ine no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, ar	nd sharing arra	ingemen	ts
			N/A					
				<u> </u>				
				<u> </u>				
								
				 				
		·					-	
								
2a		•	tly affiliated with, or related to, one		ations described		X	h
		• •	r than section 501(c)(3)) or in sect	tion 5277 .	•	Yes	LA	INO
b	If "Yes," co	omplete the following scho		(h) Tune of examination	(c) Description of relation	nchin		
		(a) Name of org	anization	(b) Type of organization	(c) Description of relation	пэшр		
		N/A			-			
	 							
	-							
								
	Linds	er penalties of penury. I declare	e that I have examined this return, includ	Ing accompanying schedules and	statements, and to the best of my knowledge and	belief, it js tru	е, солес	t,
e:	and		arer (other than taxpayer or fiduciary) is b			\mathcal{L}		
	gn	-)/10/100	OTIFULL	1 11 /14	5/11 resider			
•••		Signature of officer or tru	istee	Date	Title			
		Print/Type preparer's na			Date / Check If PTII	N		
		, po propulor 3 lid		1/////	self- employed			
Pa	id	JULIE A MC	COY, CPA L hil	U MIKIN	$\mathbb{I}(//4//)$			
	eparer	Firm's name ► RIC	HARDSON & ASSOC	TATES, PC	Firm's EIN ▶			
	e Only	Tana statue F 1010			' / ' ' ' '			
	. y	Firm's address ▶ 17	16 N 120TH STRE	ET				
			AHA, NE $68154-1$		Phone no (40)	2) 496	5-70	000
		<u> </u>		<u> </u>	13 110110 110 (2.0)	- / OOO	DE "	2010

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Employer identification number Name of the organization 47-0828994 COURSE IN MIRACLES SOCIETY Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

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 line 2 of its Form 990-PF, to certify

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Sche	dule B (Fo	orm 990, 990-EZ, or 990-PF) (20	10)	 	
		1 -41-		 <u> </u>	

Name of organization

Employer identification number

1 of 1 of Part I

COURSE IN MIRACLES SOCIET	COURSE	IN	MIRACLES	SOCIETY
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47-0828994

Part I	Contributors (see Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	AQUARIUS FOUNDATION 10029 HAMPTON PLACE TAMPA, FL 33618	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)

of Part II

Page of of Employer Identification number

COURSE IN MIRACLES SOCIETY

47-0828994

Part II No	ncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom 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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
453 12-23-10		Sahadula B (Form C	 190, 990-EZ, or 990-PF) (2

	990, 990-EZ, or 990-PF) (2010)		Page of o
mę of orgai	IIZAGUN		Employer identification number
OURSE	IN MIRACLES SOCIETY		47-0828994
art III	Exclusively religious, charitable, etc., in	e columns (a) through (e) and the foots, charitable, etc., contributions o	501(c)(7), (8), or (10) organizations aggregating ollowing line entry. For organizations completing of
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ -			
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
No.			
rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
-			
n) No. From Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
a) No. from			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ -			
		(e) Transfer of gift	Relationship of transferor to transferee

FORM 990-PF	INCOME AND COST OF GOODS SOLI INCLUDED ON PART I, LINE 10	D 	STATEMENT 1
INCOME	-		
1. GROSS RECEIPTS 2. RETURNS AND ALLOWAL 3. LINE 1 LESS LINE 2		68,391	68,391
	(LINE 15)	37,026	31,365
	TANGE FAND 6)		21 265
COST OF GOODS SOLD	LINES 5 AND 6)	;	31,365
8. INVENTORY AT BEGINS 9. MERCHANDISE PURCHAS 10. COST OF LABOR 11. MATERIALS AND SUPP		65,072 34,799	
12. OTHER COSTS		9,600	109,471
14. INVENTORY AT END OF 15. COST OF GOODS SOLD	F YEAR (LINE 13 LESS LINE 14)	72,445	37,026

FORM 990-PF COST	OF GOODS SO	LD - OTHER COS	STS S	TATEMENT	_2
DESCRIPTION				AMOUNT	
SHIPPING		-		7,69	
BOOKS GIVEN AWAY AT COST STORAGE COSTS				-1,28 3,18	
TOTAL OTHER COSTS			_	9,60	0.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
ACCOUNTING FEES	7,150.	0.	3,373.	3,77	77.
TO FORM 990-PF, PG 1, LN 16B	7,150.	0.	3,373.	3,77	77.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT	4
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITAB	3LE
DESCRIPTION	PER BOOKS	MENT INCOME	NET INCOME	PURPOSE	ES
ADVERTISING COMPUTER DATA/SERVICES	20,607. 3,743.		20,607. 3,743.		0.
EBAY & PAYPAL SERVICE FEES	348.		348.		0.
OFFICE SUPPLIES	288.		0.		88.
MISC	177.		0.	17	77.
LIBRARY	92.		0.		92.
TELEPHONE	995.		0.		95.
TRANSLATION WIRE TRANSFER FEES	8,801.		3,219.		32.
TO FORM 990-PF, PG 1, LN 23	35,182.	0.	27,917.	7,26	55.

FORM 990-PF DEPRECIATION OF ASSI	ETS NOT HELD FOR	INVESTMENT	STAT	EMENT 5
DESCRIPTION	COST OR OTHER BASIS			K VALUE
COMPUTER	373.	1	87.	186.
TOTAL TO FM 990-PF, PART II, LN 14	373.	1	87.	186.
FORM 990-PF OTH	HER LIABILITIES	<u></u>	STAT	EMENT 6
DESCRIPTION		BOY AMOUN	T EOY	AMOUNT
SALES & USE TAX LIABILITY	-		88.	38.
TOTAL TO FORM 990-PF, PART II, LIN	NE 22		88.	38.
FORM 990-PF PART VIII - LIST			STAT	EMENT 7
TRUSTEES AND	TITLE AND	GERS COMPEN-	EMPLOYEE BEN PLAN	EXPENSE
	FOUNDATION MANA	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
NAME AND ADDRESS THOMAS E WHITMORE 7602 PACIFIC ST, STE 200	TITLE AND AVRG HRS/WK PRESIDENT/DIRECT	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
NAME AND ADDRESS THOMAS E WHITMORE 7602 PACIFIC ST, STE 200 OMAHA, NE 68114 CARMEN CAMERON 1218 S 2ND ST	TITLE AND AVRG HRS/WK PRESIDENT/DIRECTION OF THE PRESIDENT	COMPEN-SATION CTOR	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT 0.
NAME AND ADDRESS THOMAS E WHITMORE 7602 PACIFIC ST, STE 200 OMAHA, NE 68114 CARMEN CAMERON 1218 S 2ND ST LOUISVILLE, KY 40203 JOY GREEN 3302 BELVEDERE BLVD	TITLE AND AVRG HRS/WK PRESIDENT/DIRECTION 10.00 VICE PRESIDENT 5.00 SECRETARY	COMPEN-SATION CTOR 0.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT 0.
NAME AND ADDRESS THOMAS E WHITMORE 7602 PACIFIC ST, STE 200 OMAHA, NE 68114 CARMEN CAMERON 1218 S 2ND ST LOUISVILLE, KY 40203 JOY GREEN 3302 BELVEDERE BLVD OMAHA, NE 68111 PEGGY HOWLAND 2000 HILLTOP LN #3-G	TITLE AND AVRG HRS/WK PRESIDENT/DIRECTION 10.00 VICE PRESIDENT 5.00 SECRETARY 20.00 TREASURER	COMPEN-SATION CTOR 0.	EMPLOYEE BEN PLAN CONTRIB 0. 0.	EXPENSE ACCOUNT 0. 0.

FORM 990-PF SUMMAI	RY OF DIR	RECT CHARITABLE ACTIVITIES	S	STATE	MENT	8
ACTIVITY ONE DISTRIBUTION OF "JESUS CONTEXT CONSIDERED TO BE THE BOOKS DONATED TO INDIVIDUCE CHARITIES	E "THIRD	TESTAMENT" OF CHRISTIANI	гу.			
				EXP	ENSES	
TO FORM 990-PF, PART IX-	A, LINE 1				27,9	17.
FORM 990-PF		AND CONTRIBUTIONS DURING THE YEAR		STATE	MENT	9
RECIPIENT NAME AND ADDRES	SS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		PIENT TUS	AMOU	NT
AURORA FELLOWSHIP 613 HUMBOLDT ST RICHMONI 94805	O, CA	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	PRIVAT FOUNDA 509(A)	MOIT		8.
BRENT BOYD 2315 E PALMDALE BLVD, STI #A-18 PALMDALE, CA 93550		NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A			6.
ERIC FRAIZE 1320 N MCQUEEN RD, APT# 2 CHANDLER, AZ 85225	2161	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A			6.
GERALD ANDRES JR 2242 S.E. MASTER AVE POI LUCIE, FL 34952	RT ST	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A			3.
GINGER PRICE 5800 OLD BILL COOK RD AS GA 30349	TLANTA,	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A			18.

COURSE IN MIRACLES SOCIETY			47-0828994
GLORIA SHAW 73 GORGE RD WEST, APT# 309 VICTORIA, CANADA, CANADA V9A-1L9	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	5.
GREGG SCOTT 4325 SAN JUAN ST. NE LACEY, WA 98516	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	5.
JOE WOLFE 6833 STANLEY AVENUE BERWYN, IL 60402	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	1,062.
JOY GREEN 3302 BELVEDERE BLVD OMAHA, NE 68111	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	28.
KEN KAIMAN 7441 CENTER BAY DR NORTH BAY VILLAGE, FL 33141	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	35.
KEVIN RICE 411 NE 21ST STREET MIAMI, FL 33137	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	6.
	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	8.
MG WEBER-CASPERS - RINGDJK 384, NL-8244BT LILYTAD-HAVEN FLEVOLAND, THE NETHERLANDS, NETHERLANDS	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	52.
MIKE ACTON 711 MEDFORD CENTER #432 MEDFORD, OR 97504	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	4.
MOLLY DEVOSS 121 PAYNE ST DALLAS, TX 75207	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	5.

COURSE IN MIRACLES SOCIETY			47-0828994
PAUL MARTIN 2100 WOODLAKE DR NE, APT 101 PALM BAY, FL 32905	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	5.
SANDY DEBY 4665 GEORGE RD COWICHAN BAY, CANADA, BOTSWANA VOR-1N1	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	N/A	6.
UNITY CHURCH OF BEAUMONT 1555 S 23RD ST BEAUMONT, TX 77707	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	CHURCH	6.
UNITY CHURCH OF CHRISTIANITY 2929 UNITY DR HOUSTON, TX 77057	NONE BOOK TO BE USED FOR PERSONAL SPIRITUAL JOURNEY/STUDY	CHURCH	6.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		1,274.

Form 886	SB (Prov 1-2011)				Page 2
	are filing for an Additional (Not Automatic) 3-Month Ex	ctension,	complete only Part II and check this b	oox	▶ X
Note On	ly complete Part II if you have already been granted an a	automatic	3-month extension on a previously file	d Form 8868	
• If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I (on page 1)		
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no	copies needed)	
Type or	Name of exempt organization .			Employer identific	ation number
print	COURSE IN MIRACLES SOCIETY			47-08289	94
File by the extended due date for filing your filing y					
return See instructions	City, town or post office, state, and ZIP code. For a followard NE 68114-5405	oreign add	dress, see instructions		
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)		0 4
Application	on	Return	Application		Return
Is For		Code	Is For		Code
Form 990		01			
Form 990	BL	02	Form 1041-A		08
Form 990	EZ	03	Form 4720		09
Form 990-	PF	04	Form 5227		10
Form 990-	T (sec 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-	T (trust other than above)	06	Form 8870		12
STOP! Do	not complete Part II if you were not already granted	an auton	natic 3-month extension on a previou	usly filed Form 8868.	
Telepho If the or	THE FOUNDATION oks are in the care of \triangleright 7602 PACIFIC ST one No \triangleright 402-391-2400 rganization does not have an office or place of business for a Group Return, enter the organization's four digit (s in the Un	FAX No ►		
box ►	If it is for part of the group, check this box		ch a list with the names and EINs of al	members the extens	on is for
		10VEWI	BER 15, 2011		
5 For	calendar year 2010 , or other tax year beginning $__$, and ending	,	 ,
6 If the	e tax year entered in line 5 is for less than 12 months, cl Change in accounting period	heck reas	on: Initial return	Final return	
	e in detail why you need the extension ED ADDITIONAL TIME TO GATHER	RECO	ORDS IN ORDER TO PRI	EPARE A COM	PLETE
AN	D ACCURATE RETURN				
8a If this	s application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069. er	nter the tentative tax, less any		
	efundable credits. See instructions			8a \$	0.
b If this	s application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated		
tax p	ayments made Include any prior year overpayment alk	owed as a	credit and any amount paid		
prev	riously with Form 8868			8b \$	0.
c Bala	nce due. Subtract line 8b from line 8a. Include your pay	yment with	h this form, if required, by using		
EFTE	PS (Electronic Federal Tax Payment System) See instru			8c \$	0.
	Signa	ture an	d Verification		
Inder penali Lis true, cor	lies of perjury, I declare that I have examined this form, including rect, and complete, and that I apri authorized to prepare this for	ng accomp rm	anying schedules and statements, and to th	ne best of my knowledge	and belief,
Signature 🕨	MARCHAILE & C	PA		Date ► S//(Form 886	8 (Rev. 1-2011)