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DLN: 93493134075754

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

Open to Public Inspection

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

`	ir the 20	OIZ Cal	endar year, or tax year beginni	ng 07-01-2012 , 2012, and end	ing 00-30	2013	.		
_	eck if app		C Name of organization GLOBAL COUNTRY OF WORLD PEA	CE			D Employe	er ident	ification number
Add	dress cha	nge	Doing Business As				36-451	9393	
Na —	me chang	ge							
Init	tıal return	1		mail is not delivered to street address)	Room/suite	<u> </u>	E Telephon	e numbe	er
– Tei	rmınated		1900 CAPITAL BLVD Suite				(641)2		
- Am	ended re	eturn	City or town, state or country, and		.		(041)2	09-73	01
– Apı	plication p	pending	MAHARISHI VEDIC CITY, IA 52556	o e e e e e e e e e e e e e e e e e e e			G Gross rec	eipts \$ 1	17,302,406
			F Name and address of pr	incipal officer		H(a) Is th	ıs a group r	eturn fo	or
			DR BEVAN MORRIS 1900 CAPITAL BLVD				ates?		┌ Yes ┌ No
			MAHARISHI VEDIC CITY	,IA 52556		U(b) .			ID E VALE NA
									ed? 「Yes 「No see instructions)
Та	x-exemp	t status	▼ 501(c)(3)	(insert no)	527				
w	ebsite:	► http	o //globalcountryofworldpeace	org/		H(c) Gro	up exemptio	n numl	per ►
(For	m of orga	anızatıon	Corporation Trust Associate	ion Other ►	l.	L Year of fo	ormation 2002	. M S	tate of legal domicile IA
Pa	rt I	Sum	mary						
		•	escribe the organization's missempt Activities" in statement #	ion or most significant activities #1	s				
ų		CC LXC	simpervectivities in statement is	, <u> </u>					
aovemance	_								
Ĭ							250/ 51		
Š	2 0	neck tr	nis box 🞮 if the organization of	discontinued its operations or di	sposed of	more than .	25% of its n	et ass	ets
	3 N	umber	of voting members of the gover	ning body (Part VI, line 1a) .				з	9
ACUMUES &	1			s of the governing body (Part VI,			-	4	8
	1			n calendar year 2012 (Part V , lır				5	55
3				necessary)				6	12
4	7a ⊤	otal uni	related business revenue from	Part VIII, column (C), line 12				7a	0
	b N	et unre	lated business taxable income	from Form 990-T, line 34 .			[7b	
						Pric	or Year		Current Year
	8 Contributions and grants (Part VIII, line 1h)						47,602,51	. 3	14,593,884
를	9	Program service revenue (Part VIII, line 2g)					94,86	51	104,095
Reven	10	Invest	ment income (Part VIII, colum	nn (A), lines 3, 4, and 7d)			3,42	1	-337,316
ď	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1	.1e)		-319,71	. 7	-374,281
	12		_	1 (must equal Part VIII, columr			47,381,07	, ,	12.006.202
	12			rt IX, column (A), lines 1–3) .				_	13,986,382
	13 14			IX, column (A), line 4)			6,844,87	0	5,808,892
	15			yee benefits (Part IX, column (A			\dashv		
\$	13	5-10)		yee beliefits (Fart 1X, column (A		951,06	3	1,311,850	
Expenses	16a	Profes	sional fundraising fees (Part I)	(, column (A), line 11e)				0	0
ੜੇ	ь	Total fu	ndraısıng expenses (Part IX, column (D), line 25) • 29,003					
	17	Other	expenses (Part IX, column (A)	, lines 11a-11d, 11f-24e) .			12,676,38	31	8,851,335
	18	Total e	expenses Add lines 13–17 (m	ust equal Part IX, column (A), lı	ne 25)		20,472,31	.4	15,972,077
	19	Reven	ue less expenses Subtract line	e 18 from line 12		 	26,908,76		-1,985,695
net Assets (a Fend Balances							g of Current Year		End of Year
1 4 E	20	Totala	assets (Part X, line 16)				77,936,67	'8	74,485,270
1 P	21						27,266,72		25,801,014
źŽ	22			t line 21 from line 20			50,669,95	_	48,684,256
Pai	rt II		ature Block				•	•	·
ny k	nowledg	ge and l		xamined this return, including acomplete Declaration of preparer					
		****	**			,	014-05-13		
Sigr	,	B	ture of officer				ate		
ler		will	IAM KOPPEL CFO						
			or print name and title						
		Р	rınt/Type preparer's name	Preparer's signature	Dat	4 05 40 511	CCK I II	TIN	
Paid	d	F	irm's name ► FRITH-SMITH & ARC	 HIBALD LIP	201		f-employed n's EIN ►		
^o re	parer		min 3 hame F i kithi 3miiii a Ake	HIDNED LLI			II 3 LIN F		
	· Only		irm's address ► 6355 TOPANGA CANY	ON BLVDSUITE 400		Pho	one no (818)	774-150	0
			WOODLAND HILLS, CA	A 91367					

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

✓ Yes 厂No

15.701.945

Total program service expenses ►

Part IV	Checkli	st of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
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		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 💆	8		No
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^{\square}	9		No
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		Νo
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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		No
C	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		No
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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	Yes	
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	Yes	
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		No
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		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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	Yes	
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		No
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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	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? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
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		No
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		No
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		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		No
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		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
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	Yes	

Par	Statements Regarding Other IRS Fillings and Tax Compliance			_
	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 53		1 65	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	90		
C	11 165, to fine 3a of 3b, and the organization the Form 6000-1'	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		140
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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.	°		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
.0	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
_	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

Form 990 (2012) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management **1a** Enter the number of voting members of the governing body at the end of the tax 1a 9 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 **b** Enter the number of voting members included in line 1a, above, who are Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Yes Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο 6 Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Nο 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Each committee with authority to act on behalf of the governing body? Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Νo **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 13 Yes 14 Did the organization have a written document retention and destruction policy? 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official Yes **b** Other officers or key employees of the organization 15b Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure 17 List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply ☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►WILLIAM L KOPPEL 2100 MANSION DR MAHARISHI VEDIC CITY, IA (641) 209-7501

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated 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, or 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 organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec k, unle n offic rustee	ess er e)	from the organization	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) DR PRAKASH SHRIVASTAVA	3 0	х								
DIRECTOR		_ ^								
(2) DR ROBERT G WYNNE DIRECTOR	28 0	х						30,000	0	(
(3) DR BENJAMIN FELDMAN	3 0									
		Х		Х						
TREASURER/ DIRECTOR (4) DR MAUREEN WYNNE	10 0									
	100	Х		Х						
SECRETARY/DIRECTOR (5) DR BEVAN MORRIS	5 0									
	30	х		х						
PRESIDENT/DIRECTOR										
(6) DR JOHN HAGELIN	3 0	X								
DIRECTOR										
(7) DR LARRY CHROMAN	3 0	×								
DIRECTOR										
(8) DR STEVEN RUBIN	3 0	×								
DIRECTOR		^								
(9) DR ROBERT LOPINTO	28 0									
DIRECTOR		X								

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A)	(B)	(C) (D)						(E)	Τ	(F)			
	Name and Title	Name and Title A verage Position				ion (do not check Repo					Reportable		Estima Imount of	ted
		hours per week (list	person is both an officer fr and a director/trustee) organ		•	from the from relate		compensation from related		compens	ation			
		any hours for related			organızatı 2/1099-I				from t rganızatı					
		organizations below	Individual trustae or director	Former Highest compensated employee Key employee Cofficer Institutional Trustee Individual trustee Individual trustee			•	,		relate organiza	ed l			
		dotted line)	1905 1905 1905	Thurst Sept Sept Sept Sept Sept Sept Sept Sep								organiza	CIONS	
			¥ <u>₹</u>	Institutional Trustee		lo je	l s							
			8	Trug		æ	DEI S							
				6			B. e							
												-		
												\perp		
												-		
												-		
												-		
1b	Sub-Total							•						
c	Total from continuation sheet	•		١.	•	•		-		20.000				
d					•			- \	4	30,000		0		0
2	Total number of individuals (in \$100,000 of reportable compe	-					a abov	e) w	no received	more tr	ian			
													Yes	No
3	Did the organization list any f oon line 1a? <i>If</i> "Yes," complete S						emplo	yee	, or highest	compen	sated employee			
4							no-+	•	d a+b		on from the	3		N o
4	For any individual listed on line organization and related organ													
	ındıvıdual				•	•		•				4		No
5	Did any person listed on line 1 services rendered to the organ									nızatıon	or individual for	_		
	services rendered to the organ	iizacioni 17 7cs	, compi	C2C 31	ciica	uic 3	101 34	cii pi	C13011	•	[5		No_
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tax vear	
		(A)	-	a c1011	,51		. a. criu	y C	za. chang w		(B)	1	(C)
	N	ame and business	address							Des	cription of services	-	Comper	sation
												#		
												+		

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

\$100,000 of compensation from the organization $\blacktriangleright 0$

Form 99								Page 9
Part V	/##1		of Revenue ule O contains a respon	ise to any dijestion i	n this Part VIII			
				se to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
2 £	1a	Federated cam	paigns 1a					
an I	ь	Membership du	ies 1b					
يَ قِ	С	Fundraising ev	ents 1c					
ffs, ≓ ∆	d	Related organiz	zations 1d					
ي ا⊒اق	e	Government grant						
Sir				14,593,884		ļ		
utir ier	f	similar amounts no	ons, gifts, grants, and 1f ot included above					
를	g	Noncash contributi 1a-1f \$	ons included in lines	1,389,950		ĺ		
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add line:	s 1 a - 1 f		14,593,884			
				Business Code				
Ele	2a	AGRICULTURAL IN	COME	110000	87,630	87,630		
еме	ь	TUITION INCOME		611710	16,465	16,465		
or Or	c	TOTTON INCOME		011710	10,403	10,403		
Š	d							
Program Serwce Revenue	e							
ran	f	All other progra	am service revenue					
Ĭog	'							
<u></u>	g		s 2a-2f		104,095			
	3		ome (including dividend ar amounts)		6,471			6,471
	4		stment of tax-exempt bond p		0			
	5	Royalties .		🕨	0			
			(ı) Real	(11) Personal				
	6a	Gross rents	548,416					
	Ь	Less rental expenses	938,437					
	c	Rental income or (loss)	-390,021	0				
	d	, ,	me or (loss)		-390,021			-390,02
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of		2,033,800				
		assets other than inventory						
	ь	Less cost or other basis and		2,377,587				
		sales expenses		, ,				
	С	Gain or (loss)		-343,787	-343,787			-343,787
	d 8a		55)	· · · · >	-343,767			-343,767
<u>Φ</u>	04	Gross income f events (not inc	_					
æ		\$	s reported on line 1c)					
ě		See Part IV, lir						
<u>.</u>			a					
Other Revenue	Ь		penses b		_			
J	C		(loss) from fundraising 6	events 🛌	0			
	94		from gaming activities ne 19					
			a					
	b		penses b					
	C		(loss) from gamıng actıv 	/ities 	0			
	10a	Gross sales of returns and allo						
			a					
			oods sold b					
	С		(loss) from sales of inve		0			
		Mıscellaneou		Business Code	45 740	45 740		
		MISCELLANEO	OUS INCOME	900099	15,740	15,740		-
	Ь	-						<u> </u>
	C .	A.II						
	d	All other reven	L					
	е	Total. Add lines		· · · • •	15,740			
	12	Total revenue.	See Instructions	· · · · •	13,986,382	119,835		-727,337

Form 990 (2012) Page 10								
	Statement of Functional Expenses			laka as la a de s				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All			lete column (A)				
	Check if Schedule O contains a response to any question in this Pa		(B)	(c)	(D)			
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses			
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	813,720	813,720					
2	Grants and other assistance to individuals in the United States See Part IV, line 22	3,437,172	3,437,172					
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	1,558,000	1,558,000					
4	Benefits paid to or for members	0						
5	Compensation of current officers, directors, trustees, and key employees	30,000	30,000					
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0						
7	Other salaries and wages	1,131,185	972,819	158,366				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0						
9	Other employee benefits	0						
10	Payroll taxes	150,665	129,572	21,093				
11	Fees for services (non-employees)				_			
а	Management	0						
b	Legal	5,195	5,195					
c	Accounting	40,057	8,750	27,807	3,500			
d	Lobbying	0						
e	Professional fundraising services See Part IV, line 17	0						
f	Investment management fees	0						
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	44,677	44,677					
12	Advertising and promotion	0			-			
13	Office expenses	81,464	44,519	22,603	14,342			
14	Information technology	0	,	,	,			
15	Royalties	0						
16	Occupancy	330,245	330,245					
17	Travel	69,639	69,639					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,					
19	Conferences, conventions, and meetings	1,592	1,592		-			
20	Interest	1,164,958	1,164,958					
21	Payments to affiliates	0	<u> </u>					
22	Depreciation, depletion, and amortization	1,184,125	1,184,125					
23	Insurance	132,421	122,324	10,097				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)							
а	PANDIT CAMPUS FOODSERVICE	1,382,775	1,382,775					
b	PANDIT STIPENDS	1,273,769	1,273,769					
c	PANDIT OCCUPANCY	1,473,368	1,473,368					
d	PANDIT SUPPLIES & EXPENSES	1,645,326	1,645,326					
e	All other expenses	21,724	9,400	1,163	11,161			
25	Total functional expenses. Add lines 1 through 24e	15,972,077	15,701,945	241,129	29,003			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)							

Part X Balance Sheet

Check if Schedule O Contains a response to any question in this Part X Beginning of year Cash—non-interest-bearing Sec. 666 1	
2 Savings and temporary cash investments	(B) nd of year
3 Pledges and grants receivable, net 20 3 4 Accounts receivable, net 226,625 4 4 Accounts receivable, net 226,625 4 4 Accounts receivable, net 226,625 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 0 5 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(6) voluntary employees' beneficiary organizations (see instructions) 601(c) voluntary employees' beneficiary 601(c) 601(c) voluntary employees' beneficiary 601(c) 60	707,643
A Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4998(r)(1)) persons described in section 4998(r)(3)(8), and contributing employers and sponsoring organizations of section 501(c,∀5) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L 0 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 70,299 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—program-related See Part IV, line 11 13 Investments—program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 77,936,678 16 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Tax-exempt bond liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Cother liabilities not included on lines I7-24) Complete Part X of Schedule 23 Secured mortgages and notes payable to unrelated third parties 24 Unrescured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines I7-24) Complete Part X of Schedule 26 Total liabilities not included on lines I7-24) Complete Part X of Schedule 27 Total assets 28 Temporarily restricted net assets 373,083 28 373,083 28 374,085 29 475 Total assets 373,083 28 48 Temporarily restricted net assets 37	715,085
Security Se	0
## Employees, and highest compensated employees. Complete Part II of Schedule L	215,000
Comparison of the receivables from other disqualified persons (as defined under section 4958 ((r)1), persons described in section 4958 ((r)3)(B), and contributing employers and sponsoring organizations of section 501 (r)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0
1 10a 71,897,397 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 9 70,293 70,293 9 70,293 70,2	0
1 10a 71.897,397 70.293 9 70.293 70.293 9 70.293 70	
10a	
10a	11,825
b Less accumulated depreciation 10b 7,938,037 48,287,914 10c 11	11,023
11 Investments—publicly traded securities	63,759,360
12 Investments—other securities See Part IV, line 11	122
13	0
14	
15 Other assets See Part IV, line 11 28,045,959 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 77,936,678 16 17 18 Grants payable and accrued expenses 721,486 17 18 Grants payable 19 Deferred revenue 7,500 19 19 19 19 19 19 19	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	9,076,235
17	74,485,270
18 Grants payable	598,050
19 Deferred revenue	400,000
Tax-exempt bond liabilities	0
21 Escrow or custodial account liability Complete Part IV of Schedule D	3,994,906
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0,334,300
24 Unsecured notes and loans payable to unrelated third parties	
24 Unsecured notes and loans payable to unrelated third parties	0
24 Unsecured notes and loans payable to unrelated third parties	19,443,980
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	
26 Total liabilities. Add lines 17 through 25	
Organizations that follow SFAS 117 (ASC 958), check here F and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	1,364,078
lines 27 through 29, and lines 33 and 34.	25,801,014
27 Unrestricted net assets	
28 Temporarily restricted net assets	47,979,532
Permanently restricted net assets	704,724
Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	0
30 Capital stock or trust principal, or current funds	
31 Paid-in or capital surplus, or land, building or equipment fund	
32 Retained earnings, endowment, accumulated income, or other funds	
정 33 Total net assets or fund balances	48,684,256
34 Total liabilities and net assets/fund balances	74,485,270

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		13,9	986,382
2	Total expenses (must equal Part IX, column (A), line 25)	2			72,077
3	Revenue less expenses Subtract line 2 from line 1	3			85,695
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-	
5	Net unrealized gains (losses) on investments	5			, ,
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		48,6	84,256
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b		

Additional Data

Software ID: Software Version:

EIN: 36-4519393

Name: GLOBAL COUNTRY OF WORLD PEACE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.										
(Code) (Expenses \$	91,042	ıncludıng grants of \$) (Revenue \$	87,630)					
The Organization in	mplemented projects to									
(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)					
make total knowled	ge of natural law									

Describe the exem	pt purpose achievements for each	of the organization's three largest progr	ram services by expenses.		
Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.					
(Code) (Expenses \$	including grants of \$) (Revenue \$)	
avaılable ın agrıcult	ure through organic				
(Code) (Expenses \$	including grants of \$) (Revenue \$)	
and Maharıshı Vedi	c Organic Agriculture				

-- -

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. (Code) (Expenses \$ Including grants of \$) (Revenue \$) Including expenses, equipment and (Code) (Expenses \$ Including grants of \$) (Revenue \$)					
Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.					
(Code) (Expenses \$	including grants of \$) (Revenue \$)	
ıncludıng expenses,	equipment and				
(Code) (Expenses \$	including grants of \$) (Revenue \$)	
depreciation					

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Form 990, Part	111 - 4 Program Servic	е Ассотріі	snments (See the In	structions)	
Section 501(c)(3)		47(a)(1) trusts	s are required to report the	program services by expenses. amount of grants and allocations to	
(Code) (Expenses \$	1,558,000	ıncludıng grants of \$	1,558,000) (Revenue \$)
The Organization p	provided grants to				
(Code) (Expenses \$		including grants of \$) (Revenue \$)
non-profit educatio	onal organizations in				

orm 990, Part	ction 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported. (Code) (Expenses \$ Including grants of \$) (Revenue \$) In to provide housing, facilities and			
Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.				
(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
India to provide hoi	using, facilities and			
(Code) (Expenses \$	including grants of \$) (Revenue \$)
support for the Ved	ıc Pandıts and Vedıc			

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. (Code) (Expenses \$ Including grants of \$) (Revenue \$) experts of India for their group practice (Code) (Expenses \$ Including grants of \$) (Revenue \$)				
Section 501(c)(3)	and (4) organizations and 4947(a)	(1) trusts are required to report the amo	• •	
(Code) (Expenses \$	including grants of \$) (Revenue \$)
experts of India for	their group practice			
(Code) (Expenses \$	including grants of \$) (Revenue \$)
of the Transcenden	tal Meditation and			

-- -

51111 550, 1 dit	111 - 4 Program Service Ac	complishments (See the Instru	ctions)	
Section 501(c)(3)		of the organization's three largest progr (1) trusts are required to report the amo ach program service reported.		
(Code) (Expenses \$	including grants of \$) (Revenue \$)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134075754

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

GLOBAL COUNTRY OF WORLD PEACE

Department of the Treasury Internal Revenue Service

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.

Inspection

									36-4519		
Par				blic Charity Sta						instruction	ıs.
The o	rganı:			te foundation becaus			= -				
1			-	on of churches, or a				section 170	(b)(1)(A)(i)	•	
2		A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Sched	ule E)				
3	Γ	A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon descı	rıbed ın secti	on 170(b)(:	1)(A)(iii).		
4	Γ			h organization operat	ted ın conjun	iction with a	nhospital des	scribed in s	ection 170(b)(1)(A)(iii).	. Enter the
_	_			ty, and state	+ - 6 11						
5	ı	_	<u>.</u>	erated for the benefi	_	e or univers	ity owned or	operated by	/ a governme	ntai unit des	scribed in
_	_			(A)(iv). (Complete P	•		1 1	. 470(1)	(4)(4)(
6	<u> </u>			local government or							
7 8	▽	describ	oed in sectio	at normally receives on 170(b)(1)(A)(vi). described in sectior	(Complete F	Part II)		J	nental unit or	from the ge	neral public
9	,		-	at normally receives			-	-	ibutions ma	mharchin fa	es and aross
9	'										
				ities related to its ex oss investment inco							
										ı tax) ildili i	Jusiliesses
10	_			ganization after June							
	<u>'</u>	_		ganized and operated							h hh
11	1	one or the box	more public <u>ct</u> hat descri	ganized and operated ly supported organiz bes the type of supp	ations descr or <u>ti</u> ng organ	ribed in sect lization and	tion 509(a)(1 complete lin	l) or section es 11e th <u>ro</u>	n 509(a)(2) ough 11h	See section	509(a)(3). Check
	_		· ·	b							
е	1	othert	_	ox, I certify that the on managers and ot	_			•			•
f		If the c		received a written do	etermination	from the IF	RS that it is a	Type I, Ty	pe II, or Typ	e III suppo	rting organization,
g				2006, has the organi	ızatıon accep	oted any gif	t or contribut	on from an	y of the		'
			ng persons?								
				irectly or indirectly o				n persons d	escribed in (Yes No
				governing body of th		_	n?				lg(i)
		• •	•	er of a person descr	• •					11	.g(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?			11	g(iii)
h		Provide	e the followi	ng information about	the support	ed organiza	tion(s)				
_) Nam uppoi		(ii) EIN	(iii) Type of organization	(iv) Is organizat		(v) Did yo		(vi) I: organiza		(vii) A mount of monetary
	ganiza			(described on	col (i) lis		ın col (i)		col (i) or		support
	_			lines 1- 9 above	yourgove		suppo		ın the		
				or IRC section	docume	nt?					
				(see				_			_
				instructions))	Yes	No	Yes	No	Yes	No	
Total											

Schedule A (Form 990 or 990-EZ) 2012 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 31,658,984 21,534,758 16,079,995 15,353,948 14,593,884 99,221,569 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 31,658,984 21,534,758 16,079,995 15,353,948 14,593,884 99,221,569 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 63,349,535 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 35,872,034 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2009 (d) 2011 (a) 2008 (c) 2010 (e) 2012 (f) Total beginning in) 🟲 31,658,984 21,534,758 15,353,948 14,593,884 Amounts from line 4 16,079,995 99,221,569 Gross income from interest, dividends, payments received on securities loans, rents, royalties 331,255 111,931 654,648 479,269 554,887 2,131,990 and income from similar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 322,496 -313,639 19,856 5.935 15,740 50,388 capital assets (Explain in Part IV) 11 Total support (Add lines 7 101,403,947 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 35 375 % Public support percentage for 2011 Schedule A, Part II, line 14 15 34 930 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┡┰ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493134075754

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

Open to Public

tema	Revenue Service F Attach to For	m 990. ► See separate instructions.		Inspection
	me of the organization DBAL COUNTRY OF WORLD PEACE		Emp	loyer identification number
			36-4	4519393
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts. Complete if th
	<u>g</u>	(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
ŀ	Aggregate value at end of year			
;	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	-	nor advi	sed Yes No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef			
25	conferring impermissible private benefit? rt II Conservation Easements. Complete if	the organization answered "Ves" t	o Forn	· · · · · · · · · · · · · · · · · · ·
L 2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	or education)	certifie	ically important land area d historic structure n of a conservation
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
d	Number of conservation easements included in (c) accomistoric structure listed in the National Register	juired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, transferr	ed, released, extinguished, or terminate	ed by th	ne organization during
	the tax year ►			
ŀ	Number of states where property subject to conservat	ion easement is located ►		
•	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments o	during the year
,	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s durin	g the year
3	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı)
)	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's financia		•
a I	t III Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar Assets.
.a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			- \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS			•
а	Revenues included in Form 990, Part VIII, line 1			► \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u>llections of Ar</u>	t, His	<u>stori</u>	cai ii	<u>reası</u>	ires, or O	<u>tne</u>	r Similar As	sets (co	ontinued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other reco	rds, cl	heck	any of	the fol	lowing that a	are a	significant use	of its	
а	Public exhibition		d	Γ	Loan	orexc	hange progi	rams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expl	aın ho	w the	y furth	er the	organızatıor	ı's ex	cempt purpose	ın	
5	During the year, did the organization solicit o								nılar	_	_
	assets to be sold to raise funds rather than t									┌ Yes	l No
Par	t IV Escrow and Custodial Arrange Part IV, line 9, or reported an am						n answere	a "Y	es" to Form !	1 90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?		•				or other ass	ets	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follo	wing	able		_				
									Aı	nount	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	>						☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatı	on has	been p	rovided in F	art :	XIII		Γ
Pa	rt V Endowment Funds. Complete	f the organizatio	n ans	swer	ed "Ye	es" to	Form 990,	Par	t IV, line 10.		
_		(a)Current year	(b)Prior	year	b (c) ⊺	wo years back	((d)	Three years back	(e) Four y	ears back
1a	Beginning of year balance							-		 	
b	Contributions							+		 	
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balan	ice (lir	ne 1g	, colum	nn (a))	held as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ►										
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posses organization by	_	zatıon	that	are hel	d and a	admınıstere	d for		Yes	No
	(i) unrelated organizations		•			•		•	3a		<u> </u>
L	(ii) related organizations							•	3a		<u> </u>
ь 4	Describe in Part XIII the intended uses of th	•				•		•	3	<u> </u>	<u> </u>
	t VI Land, Buildings, and Equipme					10.					
	Description of property			(a)	Cost or	other	(b)Cost or o basis (othe		(c) Accumulated depreciation	(d) Bo	ook value
1a	Land						15,153	,811		1	15,153,811
b	Buildings						46,055	-	5,492,87	_	10,563,043
c	Leasehold improvements						682	,574	80,19	7	602,377
d	Equipment						1,520	,280	1,028,98	31	491,299
_е	Other						8,284	,813	1,335,98	13	6,948,830
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (B), line	10(c).)		🛌	€	53,759,360

Part VIII Investments—Other Securities. Sec	<u>e Form 990, Part X, line 12</u>	<u>)</u> .	
(a) Description of security or category	(b) Book value		d of valuation
(including name of security)		Cost or end-of	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	 -		
Part VIII Investments—Program Related. S	ee Form 990 Part Y line 1	13.	
(a) Description of investment type	(b) Book value		d of valuation
(a) Description of investment type	(b) Book value		f-year market value
			,
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+		
Part IX Other Assets. See Form 990, Part X,	line 15.		
(a) Desc			(b) Book value
(1) FINANCING COSTS, NET			53,686
(2) DEPOSITS ESCROW			0
(3) LAND HELD FOR SALE			8,262,238
(4) LAND HELD FOR DEVELOPMENT			742,788
(5) GUARANTEE FEES, NET			17,523
,			
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		9,076,235
Part X Other Liabilities. See Form 990, Part			
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
ACCRUED INTEREST	1,238,336		
ACCRUED PAYROLL	125,742		
	 		
	i		
Table (Calina (I) and an 15 and a 15 an			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Fin 48 (ASC 740) Footnote In Part XIII. provide the to	1,364,078		

j Par	Reconciliation of Revenue per Audited Financial Statements with Revenue per Retur	<u>n</u>
1	Total revenue, gains, and other support per audited financial statements	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIII)	
e	Add lines 2a through 2d	
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	
Part	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn
1	Total expenses and losses per audited financial statements	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	
b	Prior year adjustments	
C	Other losses	
d	Other (Describe in Part XIII)	
e	Add lines 2a through 2d	
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	
Part	t XIII Supplemental Information	
Com	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines $1a$ and 4 , Part IV, lines	1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier Return Reference Explanation

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DLN: 93493134075754

SCHEDULE F (Form 990)

3a Sub-total

to Part I

b Total from continuation sheets

c Totals (add lines 3a and 3b)

Statement of Activities Outside the United States

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

OMB No 1545-0047 2012

> Open to Public **Inspection**

Department of the Treasury ▶ Attach to Form 990. ▶ See separate instructions. Internal Revenue Service Name of the organization **Employer identification number** GLOBAL COUNTRY OF WORLD PEACE

		_			36-4519393	
Pa	"Yes" to Form 990, Pai			ne United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the cassistance, the grantees' eligible the grants or assistance?	gibility for the q	grants or assis	tance, and the selecti	on criteria used to awa	
2	For grantmakers. Describe in the United States. Activites per Region (The follow					nds outside
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	i	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in region
	South Asia	0			Facilities and support	1,558,00

1,558,000

1,558,000

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South Asia	VEDIC PANDITS	1,000,000	WIRE		NONE	CASH
			South Asia	VEDIC PANDITS	558,000	WIRE		NONE	CASH
2	Elicol cotal man			sted above that are r ee or counsel has pro					2
3	Enter total num	nher of other	organizations or e	ntities					

Schedule F (Form 990) 2012

Part III 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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		1
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
					<u> </u>		
					<u> </u>	<u> </u>	
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			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
			<u> </u>		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	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)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Γ	Y	'es	্য	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)	Г	Y	'es	<u> </u>	Νo
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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Υ	'es	<u> </u>	Νo
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)	Г	Υ	'es	<u> </u>	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Γ	Υ	'es	<u> </u>	No

Schedule F (Form 990) 2012

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).

às applicable. Als	o complete this part to provide any ac	Iditional information (see instructions).
Identifier	ReturnReference	Explanation
Schedule F Part I Line 2	Describe procedures for monitoring the use of grant funds outside of U S	Under the by-laws of the Organization, the Board of Directors reviews all requests of funds from foreign organizations and for activities in any foreign country, and such requests are required to be in writing in the form approved by the Organization and include a budget for the use of funds and names and qualifications of the individuals who will carry out the project. The accounting department maintains records of all grants made and the details of the funds expended. In the case of India, the Organization requires written monthly reports in a form approved by the Organization including numbers of Vedic Pandits participating in the group practice of the Transcendental Meditation and TM-Sidhi program and other aspects of their daily routine, financial reports, and narrative reports. Grants for the subsequent month are based upon the numbers of Pandits participating in the programs in the prior month. Representatives of the Organization work directly with their counterparts in India and make regular site visits. For grants for smaller projects in other countries, the Organization requires reports including financial reports at the completion of the project or no less often than quarterly. A representative of the Organization or its affiliated non-profit organizations in the U.S. is directly responsible for the project in the foreign country.
		property is the project in the longing country
		+
_		
		+
		Schodulo E (Form 990) 2012

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Schedule I (Form 990)

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

OMB No 1545-0047

2012

DLN: 93493134075754

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

						36-4519393	
Part I General Inform	nation on Grants	and Assistance					
Does the organization ma the selection criteria usedDescribe in Part IV the or	d to award the grants (orassistance?					✓ Yes
	<u> </u>	Governments and			Complete if the or	aanization answered	l "Vec" to
		recipient that received					i les to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MAHARISHI UNIVERSITY OF MANAGEMENT 1000 N 4TH STREET FAIRFIELD,IA 52556	42-1315493	501(C)(3)	400,000	0	none	none	FINANCIAL SUPPORT
(2) SEEDS OF HEAVEN 504 N 4TH STREET 302 FAIRFIELD,IA 52556	26-1116889	501(c)(3)	10,980	0	none	none	FINANCIAL SUPPORT
(3) MAH GLOBAL ADMINISTRATION THROUGH NATURAL LAW PO BOX 1140 LIVINGSTON MANOR, NY 12758	95-2485909 	501(C)(3)	ı	402,720	FMV I	RENT	PEACE PAL SUPPORT
						_	l
Enter total number of secEnter total number of other						. 	3

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SUPPORT FOR PEACE CREATING GROUPS	764	3,437,172	0	none	none

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
LINE 2	GRANT FUNDS IN THE U S	The Organization make grants to individuals with financial need to participate in the Invincible America Assembly including group practice of the Transcendental Meditation and TM-Sidhi program. The Organization evaluates eligibility to receive grants based on a standard application including qualifications and commitment to participate in the programs for which these grants are awarded. The Organization also makes Grants to domestic non-profit 501(c)(3) organizations with which it shares common goals and such grants are reviewed and approved by the Board of Directors of the Organization taking into consideration the prior experience of the Organization with the grant recipients and their demonstrated ability to carry out projects in keeping with the goals of both the grantor and the grantee organization. For grants to domestic individuals for the Invincible America Assembly, the Organization monitors program participation through an electronic card swipe system, and program participation through its course liaisons. Grants are discontinued for any grant recipient who does not attend the program or fully participate. For grants to other domestic 501(c)(3) organizations, the Organization is generally directly involved with the projects and able to see first hand that results are being achieved. Where this is not the case, the Organization receives reports to the Board of Directors and conducts site visits.
	·	Schedule I (Form 990) 2012

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DLN: 93493134075754

2012

Open to Public

Inspection

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

GLOBAL COUNTRY OF WORLD PEACE

(Form 990)

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

► See separate instructions.

36-4519393 Part I **Bond Issues (h)** On (i) Pool (g) Defeased behalf of (c) CUSIP # financing (f) Description of purpose (a) Issuer name (b) Issuer EIN (d) Date issued (e) Issue price ıssuer Yes No Yes No Yes No CITY OF MAHARISHI VEDIC EDUCATIONAL FACILITY CITY IOWA 42-1523132 11-01-2007 4,550,000 Χ Χ Χ REVENUE B Part II **Proceeds** В C D Α Amount of bonds retired 0 Amount of bonds legally defeased 2 3 Total proceeds of issue Gross proceeds in reserve funds 4 0 5 Capitalized interest from proceeds 0 6 Proceeds in refunding escrows Issuance costs from proceeds 7 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 0 Capital expenditures from proceeds 10

		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		Х						
15	Were the bonds issued as part of an advance refunding issue?		Х						
16	Has the final allocation of proceeds been made?	х							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	Х							
Par	Private Business Use					_			

Other spent proceeds

Other unspent proceeds

Year of substantial completion

11

12

			4		В	(С	1)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		Х						
For P	aperwork Reduction Act Notice see the Instructions for Form 990		at No 5019	93F			Sch	edule K (For	m 990\ 2012

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Sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)		•							
				A		В		<u>c</u>	ļ.,	D
За	Are there any management or service contracts that may result in private of bond-financed property?	business use	Yes	No X	Yes	No	Yes	No	Yes	No
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the final property?									
С	Are there any research agreements that may result in private business use financed property?	e of bond-		х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government			0 00000%		%		%		%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government			0 00000%		%		9/0		%
6	Total of lines 4 and 5			0 00000%		%		%		%
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?			х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of			%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections		х						
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?			x						
Par	t IV Arbitrage									
	Arbitrage	А			В		С		D	
		Yes	No	Yes	No	Yes	;	No	Yes	No
1	Has the Issuer filed Form 8038-T?		Х							
2	If "No" to line 1, did the following apply?			•				•		
а	Rebate not due yet?		Х							
b	Exception to rebate?		Х							
С	No rebate due?	×								
	If you checked "No rebate due" in line $2c$, provide in Part VI the date the rebate computation was performed			1	.		,			
3	Is the bond issue a variable rate issue?	Х								
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
b	Name of provider	0								
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									
		1						I .		

Part IV Arbitrage (Continued)

			А		В		С		D		
			Yes	No	Yes	No	Yes	No	Yes	No	
5a	Were gross proceeds invested in a contract (GIC)?	guaranteed investment		х							
b	Name of provider		0								
С	Term of GIC										
d	Was the regulatory safe harbor for o value of the GIC satisfied?	establishing the fair market									
6	Were any gross proceeds invested period?	beyond an available temporary		х							
7	Has the organization established w the requirements of section 148?	ritten procedures to monitor		х							
Pa	rt V Procedures To Undert	ake Corrective Action									
			А		В		С		D		
			Yes	No	Yes	No	Yes	No	Yes	No	
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?			Х							
Pa	art VI Supplemental Infor	mation. Complete this part to pr	ovide addition	al ınformatı	on for respon	ses to ques	<u>tıons on Sche</u>	edule K (see	instructions)		
	Identifier	Return Reference				Explana	ation				

Schedule K (Form 990) 2012

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DLN: 93493134075754

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Noncash Contributions

Name of the organization GLOBAL COUNTRY OF WORLD PEACE **Employer identification number**

0.=-	4.T. Tunes of Dueses				36-4519393			
<u>'al</u>	tI Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line		(d) f determin ribution a		īs
	Art—Works of art			19				
	Art—Works of art							
	Clothing and household							
	goods	X	1	2,000	EM\/			
	Boats and planes			2,000	1111			
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
	Qualified conservation contribution—Historic							
	structures							
	Real estate—Residential							
	Real estate—Commercial							
	Real estate—Commercial							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	FORGIVENESS							
	Other (OF DEBT)	X	1	984,000	CASH VALUE			
	Other (RENT)	X	1	402,720				
	Other ►()			<u>'</u>				
	Other ► ()							
	Number of Forms 8283 received	by the orga	nization during the tax vea	r for contributions	<u> </u>			
	for which the organization comple				29			
				•			Yes	N
i	During the year, did the organiza	atıon receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	rs from the	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		N
,	If "Yes," describe the arrangement	ent in Part 1	II					
	Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
	Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell	noncash • • •	32a		N
	If "Yes," describe in Part II					32a		1 1
		t an amount	in column (c) for a type of	property for which column (a) is chacked			
	If the organization did not report describe in Part II	t all alliount	. III columni (c) for a type of	property for which column (a) is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, 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.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

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2012

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Department of the Treasury Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Name of the organization GLOBAL COUNTRY OF WORLD PEACE **Employer identification number**

36-4519393

Identifier	Return Reference	Explanation
PART VI SECTION B LINE 12C	POLICIES	
PART VI SECTION B LINE 11	POLICIES	The IRS form 990 is sent to all Board members prior to filing. The Finance Committee of th e Board of Directors has responsibility to review the IRS FORM 990 with the Controller and to approve the IRS FORM 990 prior to filing with the IRS.
PART VI SECTION B LINE 15	POLICIES	OFFICERS, BOARD MEMBERS, AND KEY EMPLOYEES COMPENSATION DETERMINATION PROCEDURES The proc ess had not been used in previous years since our compensation amounts are considerably be low the national average in light of best practices, however, the Organizations's Finance Committee did review the compensation of all employees in the context of the prevailing c ompensation in the state of low a for comparable job responsibilities, as well as all other relevant data, economic trends, local costs-of-living indexes, etc and felt that the amo unts paid to our officers, key and all other employees were very conservative, but fair, a nd far from excessive
PART VI SECTION A LINE 2	GOVERNING BODY AND MANAGEMENT	Robert Wynne (director) and Maureen Wynne (secretary and director) are husband and wife
PART VI Section C LINE 19	DISCLOSURE	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC AS Provided Upon Request
PART VII	compensation of officers and directors	A DIRECTOR DURING THE FISCAL YEAR HAS LIVED IN A FACILITY

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R**

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

36-4519393

DLN: 93493134075754

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GLOBAL COUNTRY OF WORLD PEACE

(Form 990)

► Attach to Form 990. ► See separate instructions. Department of the Treasury Internal Revenue Service Name of the organization **Employer identification number**

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

(e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.) (c) (d) (e) (f) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (13) controlled (if section 501(c)(3)) entity entity? Yes Schedule R (Form 990) 2012 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y

(a)		(b)	(c)	(d)		(e)	(f)	(g)	(H	1)	(i)	Ú	<u>)</u>	(k)
Name, address, and EIN related organization	l of	Primary activity		Direct controlling entity	incom un exclu ta sect	dominant	Share of total income	Share o	of Dispro ear alloca	ortionate		Gene mana part	ral or iging	Percentage ownership
D CAN DYFOO I I C		DD OD DELVELOD		CLORAL				4.0	Yes	No		Yes	No	00.500
SAN DIEGO LLC ANCHESTER AVE AS, CA 92024 1646		PROP DEVELOP	CA	GLOBAL COUNTRY			0	10	00	No	0			99 600 %
Identification of Related line 34 because it had one or	Organizations Taxab more related organiza	ole as a Corpo	oration as a co	n or Trust rporation o	(Con r trus	mplete ıf st durıng	the organ	nızatıon ear.)	answe	red "Y	es" to Forn	า 990), Par	t IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreigr country)	า	(d) Direct contro entity	olling	(e) Type of en (C corp, corp, or trust)	S Incor	f total S	(g) Share of en of-year assets		(h) Percentage ownership	(I co	(i) tion 51: 0)(13) ntrolled ntity?	
										_		Y	es	No

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No	
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organ	nizations lis	sted in Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No	
b Gift, grant, or capital contribution to related organization(s)								
c Gift, grant, or capital contribution from related organization(s)								
d Loans or loan guarantees to or for related organization(s)								
e	Loans or loan guarantees by related organization(s)				1e		No	
f	Dividends from related organization(s)				1f			
					1 g		No	
	Purchase of assets from related organization(s)				1h		No	
i	Exchange of assets with related organization(s)				1i		No	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No	
					1k		No	
	Lease of facilities, equipment, or other assets from related organization(s)				11		No	
Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)								
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n 1o		No No	
0	Sharing of paid employees with related organization(s)				10		NO	
р	Reimbursement paid to related organization(s) for expenses				1p		No	
q	Reimbursement paid by related organization(s) for expenses				1q		No	
r	Other transfer of cash or property to related organization(s)				1r		No	
	Other transfer of cash or property from related organization(s)				1s		No	
3	other transfer of cash of property from related organization(s)					L		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	ncluding co	vered relationships	and transaction thresholds				
	(a)(b)Name of other organizationTransatype (action	(c) Amount involved	(d) Method of determining amo	unt ın	volved		

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

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				•	,		Ī	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	,	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data ____Return to Form

Software ID: Software Version:

EIN: 36-4519393

Name: GLOBAL COUNTRY OF WORLD PEACE

Schedule R (Form 990) 2012

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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

		•
Identifier	Return Reference	Explanation
PART III IDENTIFICATION OF RELATED		MPP SAN DIEGO, LLC WAS FORMED TO HELP FUND THE PURCHASE OF THE ENCINITAS, CA PEACE PALACE PROPERTY THE REPORTING ORGANIZATION MADE A CAPITAL CONTRIBUTION SUFFICIENT TO REPAY ALL OTHER MEMBERS OF THE LLC THE AMOUNT OF THEIR INVESTMENT PLUS INTEREST SOME OF THE MEMBERS CONTRIBUTED THEIR SHARE OF INVESTMENT TO THE REPORTING ORGANIZATION
OF RELATED ORGANIZATION TAXABLE AS		SINCE THE PROPERTY WAS PURCHASED AND BUILT WITH THE INTENTION OF THE REPORTING ORGANIZATION EVENTUALLY OWNING AND OPERATING ITS PROGRAM SERVICES FROM THE FACILITY SO BUILT AT PRESENT THERE IS ONLY ONE MINOR OWNERSHIP MEMBER WHO HAS
PARTNERSHIP		NOT WITHDRAWN FROM THE LLC TO LEAVE THE REPORTING ORGANIZATION AS SOLE MEMBER, SUCH THAT THE LLC CAN BE CLOSED THERE HAS BEEN NO ACTIVITY IN THE LLC SINCE 2009