

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## EXTENDED TO NOVEMBER 15, 2016

Federal Copy
OMB No 1545-0052

Form **990-PF**Department of the Treasury
Internal Revenue Service

Ration of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is atwww.irs gov/form990pf.

**2015** 

For	cale	ndar year 2015 or tax year	beginning		, and ending		
Na	me o	f foundation				A Employer identification	number
_(	OU	RSE IN MIRAC	CLES_SOCIETY	•		47-0828994	:
		and street (or PO box number)		address)	Room/suite	B Telephone number	-
		2 PACIFIC ST			200	402-391-24	.00
		own, state or province, cou HA, NE 6811	untry, and ZIP or foreign p L $4-5405$	oostal code		C If exemption application is p	ending, check here
		call that apply	Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization:	s check here
_			Final return	Amended return	omici puono onunty	. Toroign organization.	5, 01100K 11010
			Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test,
Н	Check	type of organization	X Section 501(c)(3) ex		· · · · · · · · · · · · · · · · · · ·	E If private foundation sta	·
	] S€	ection 4947(a)(1) nonexem		Other taxable private founda	ation	under section 507(b)(1)	
l F	air ma	arket value of all assets at e	end of year J Accounts	ng method X Cash	Accrual	F If the foundation is in a	
(f	rom .	Part II, col. (c), line 16)	O	ther (specify)		under section 507(b)(1)	
_	-\$	¬	<u> </u>	mn (d) must be on cash i	basis.)		
P	art l	Analysis of Revenue an (The total of amounts in colur necessarily equal the amount	mns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1	Contributions, gifts, grant	s, etc , received	53,882.			
	2	Check I if the foundation	n is not required to attach Sch. B				<b>*************************************</b>
	3	Interest on savings and tempo cash investments	prary	5.	5.	5.	STATEMENT 1
	4	Dividends and interest fro	m securities				
	5a	Gross rents					
	b	Net rental income or (loss)			- 1111		
<u>Φ</u>	6a	Net gain or (loss) from sale of a	assets not on line 10				
Revenue	b	Gross sales price for all assets on line 6a	<del></del>				
ě	7	Capital gain net income (from I	•		0.		
_	8	Net short-term capital gair	n			0.	
	9	Income modifications Gross sales less returns	07 121				
	10a	and anowanies	87,434. 34,501.	(*111			STATEMENT 2 STATEMENT 3
		Less Cost of goods sold [Gross profit or (loss)	34,301.	52,933.		52,933.	STATEMENT 3
	11	Other income		32,733.	11 \	32,733.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	12	Total. Add lines 1 through	h 11	106,820.	5.	52,938.	
	13	Compensation of officers, direct	, <u>,</u>	0.	0.	0.	0.
	14	Other employee salaries a					
	15	Pension plans, employee l					
ses	16a	Legal fees		,,,,,,	<del></del>	7,00	
pen	b	Accounting fees	STMT 4	8,552.	0.	3,420.	5,102.
Ē	C	Other professional fees	STMT 5	12,000.	0.	4,800.	7,200.
tive	17	Interest			RECEIVED		
itra	18	Taxes		100			
ij	19	Depreciation and depletion	1	180	MOA \$ 1 508.	180.	
ΕĐ	20	Оссирансу		11,590	1	4,636.	6,954.
Þ	21 22	Travel, conferences, and n	neetings	1,960		0.	1,960.
gar	23	Printing and publications Other expenses	STMT 6	56,437	OGDEN.UI	20 002	16 522
ij	l .	Total operating and admi		30,437%		39,902.	16,532.
Operating and Administrative Expenses	~~	expenses. Add lines 13 th		90,719.	0.	52,938.	37,748.
Ö	25	Contributions, gifts, grants	-	335.		32,930.	37,748.
		Total expenses and disbu		333.		<u> </u>	333.
	26		irsements.				
	26	Add lines 24 and 25	irsements.	91,054.	0.	52,938.	38,083.
				91,054.	0.	52,938.	38,083.
	27	Add lines 24 and 25	12	91,054. 15,766.		52,938.	38,083.
	27 a	Add lines 24 and 25 Subtract line 26 from line	12 ies and disbursements		0.	52,938.	38,083.

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<del></del>
Р	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	28,138.	8,872. 40,101.	8,872.
	2	Savings and temporary cash investments	30,101.	40,101.	40,101.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable		7	
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons			
	7	Other notes and loans receivable			
	`	Less allowance for doubtful accounts			
S	8	Inventories for sale or use	86,109.	110,244.	149,335.
Assets	9	Prepaid expenses and deferred charges	354.	110,244.	149,335. 1,414.
As	1 -	Investments - U.S. and state government obligations			•
	1	Investments - corporate stock			
	1	Investments - corporate bonds			
	1	Investments - land, buildings, and equipment basis			· · · · · · · · · · · · · · · · · · ·
	''	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14				· · · · · · · · · · · · · · · · · · ·
	'	Land, buildings, and equipment basis ► 1,275.  Less accumulated depreciation STMT 7 ► 756.	699.	519.	550.
	15	Other assets (describe			
	1	Total assets (to be completed by all filers - see the			
	"	instructions. Also, see page 1, item I)	145,401.	161,150.	200,272.
_	17	Accounts payable and accrued expenses	210/1010	102/200	
	18	Grants payable			
w	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable		·	
Ë		Other liabilities (describe STATEMENT 8)	54.	37.	
		Other Hadillado (doctorios P			
	23	Total liabilities (add lines 17 through 22)	54.	37.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
anc	25	Temporarily restricted			
Bal	26	Permanently restricted			
ď		Foundations that do not follow SFAS 117, check here			
7		and complete lines 27 through 31.	İ		
ō	27	Capital stock, trust principal, or current funds	0.	0.	
sets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	145,347.	161,113.	
let	30	Total net assets or fund balances	145,347.	161,113.	
_					
	31	Total liabilities and net assets/fund balances	145,401.	161,150.	
		Analysis of Changes in Net Assets or Fund B			
				<del></del>	
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		145,347.
	•	st agree with end-of-year figure reported on prior year's return)			15,766.
_		r amount from Part I, line 27a		2 3	13,700.
3		er increases not included in line 2 (itemize)		4	161,113.
4		lines 1, 2, and 3 reases not included in line 2 (itemize)		5	0.
5 6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (h) line 30	6	161,113.
<u> </u>	1018	i not assets of fund palances at one of year thine 4 millus line s) - Falt II, C	Ordinia (D) mie OO		

		sses for Tax on I		Income	/h\	00000004	T .	,	
		nd(s) of property sold (e or common stock, 200 st		<u>-</u>	P-PL	acquired irchase ination		acquired lay, yr )	(d) Date sold (mo , day, yr )
a									
<u>b N</u>	IONE		<del></del>					-	<del></del>
<u>c</u>		\ <del></del>				<del></del>			
d	<del></del>			<del></del>				-	
(0) 0	(f)	Depreciation allowed	(g) Cos	st or other basis	<u> </u>		(h) G	ain or (loss)	<del></del>
(e) Gross sales price		(or allowable)	1-7	expense of sale			(e) plu	s (f) minus (	g)
<u>a</u>			<del> </del>						
C C		*		-					
d									
<u> </u>								· <b>-</b>	_
Complete only for assets sho	wing gain in	column (h) and owned by	the foundation	on 12/31/69				Col (h) gain	
(i) F M V as of 12/31/69		(j) Adjusted basis		cess of col (I)		С		not less thar (from col. (l	
(1) 1 11 1 00 01 12/01/00		as of 12/31/69	over	col (j), if any				•	
3			-						
<u>b</u>	-								
d d			1						
е							,		
<u> </u>		C if gain, also ente	er in Part I. line	7	1				
Capital gain net income or (net	t capital loss	If gain, also ente If (loss), enter –	0- in Part I, line	7	) 2				
Net short-term capital gain or	(loss) as defi	ined in sections 1222(5) a	ind (6)						
If gain, also enter in Part I, line		c)			<b> </b>				
If (loss), enter -0- in Part I, line Part V Qualification	8 8	Section 4940(e) fo	Daduaad	Toy on Not	3	lenout le		<del></del>	<del></del>
Vas the foundation liable for the s				,	riod?				Yes X No
Enter the appropriate amount					ntries				
(a) Base period years Calendar year (or tax year begi	nnına ın)	(b) Adjusted qualifying di	stributions	Net value of no	(c) ncharitab	le-use asse	ts	Distrib	(d) ution ratio ided by col (c))
2014	<b>y</b> /		6,264.			39,66	3.	· · · · · · · · · · · · · · · · · · ·	.15793
2013			5,663.			36,99			.15307
2012			50,344.			31,32			1.60704
2011			28,428.			24,96			1.13889
2010			13,478.			13,08	/ •	1	1.02987
? Total of line 1, column (d)							2		4.08683
Average distribution ratio for t	he 5-vear ba	se period - divide the total	on line 2 by 5.	or by the number	of vears		- <u>-</u> -		
the foundation has been in exi	-		· • · · · · · · · · · · · · · · · · · ·	o. 5,	· , ·		3		.81736
									61 421
Enter the net value of nonchar	itable-use as	sets for 2015 from Part X	, line 5				4		61,431
Multiply line 4 by line 3							5		50,212
C. Fatar 10/ of not investment in							j		
s enter 1% of her investment in	/40/ -4	Dort Line 07h)					ء ا		Λ
- Entor 170 of not invocations in	come (1% of	Part I, line 27b)					6	<u> </u>	
	come (1% of	Part I, line 27b)					7		50,212
7 Add lines 5 and 6 3 Enter qualifying distributions f									

orn	n 990-PF (2015) COURSE IN MIRACLES SOCIETY			0828			Page 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940	(e), or 4	1948	- see i	nstru	ction	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1	j					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)						_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 📖 and enter 1%	•	1	ļ <u>.</u>		, ,	0 •
	of Part I, line 27b						
E	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				0.
3	Add lines 1 and 2		3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4_				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	ļ			0.
6	Credits/Payments						
	2015 estimated tax payments and 2014 overpayment credited to 2015						
	Exempt foreign organizations - tax withheld at source		-				
	Tax paid with application for extension of time to file (Form 8868)		-				
	Backup withholding erroneously withheld 6d		-				Λ
7	Total credits and payments Add lines 6a through 6d		7	ļ			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	_	8				0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				<u> </u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	ļ .			
		unded 🕨	11_				
_	art VII-A Statements Regarding Activities	ns interior	. In		TT	Yes	No
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	of littervenie	5 III		1a	103	X
	any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the	a definition	1/2		1b		X
U	If the answer is "Yes" to $1_{m a}$ or $1_{m b}$ , attach a detailed description of the activities and copies of any materia				"		
	distributed by the foundation in connection with the activities.	us publisii	cu oi				
	Did the foundation file Form 1120-POL for this year?				10		Х
	i Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
u	(1) On the foundation ► \$ 0 • (2) On foundation managers ► \$	0.					
٥	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		_				
	managers > \$ 0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		Х
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of inco	rporation,	0 r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	o If "Yes," has it filed a tax return on Form 990-T for this year?		N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5	· · · · · · · · · · · · · · · · · · ·	X
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict ways.	ith the stat	e law				
	remain in the governing instrument?				6	<u>X</u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), a	nd Part X	V		7	X	
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions) ► <u>NONE</u>						
b	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or design	iate)				v	
_	of each state as required by General Instruction G? If "No," attach explanation	\/F\ 4 ·			8b	Х	
9		)(5) for cal	endar			Х	
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV				9	Λ	Х
10	Did any persons become substantial contributors during the tax year? If 'Yes, ' attach a schedule listing their names and add	resses	-	E^	<u>10</u> rm <b>99</b> 0	)_DE	
				r'0	フプし	, - r · r ·	(2010)

Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		1	1
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1 !		
	If "Yes," attach statement (see instructions)	12	- <u></u> -	X
13		_13_	_X_	L
	Website address ► JCIM.NET	11 2	400	
14	The books are in care of ► THE FOUNDATION  Located at ► 7602 PACIFIC STREET, STE 200, OMAHA, NE  Telephone no ► 402-39			
45	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	1114		<del></del> _
10	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	. 00	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	···		
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
h	I if any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	16	1	1
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2015?	10		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
2	defined in section 4942(j)(3) or 4942(j)(5)) I At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	before 2015?  Yes X No			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions ) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	of "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	_3b		<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	لــيــا	<u>X</u>
	Fo	rm <b>990</b>	)-PF	(2015)

Form **990-PF** (2015)

All other program-related investments. See instructions

Total. Add lines 1 through 3

Page 8

COURSE IN MIRACLES SOCIETY

F	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ındatıons, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0. 62,367.
b	Average of monthly cash balances	1b	62,367.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	62,367.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	] ]	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	62,367.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	936.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	61,431.
6	Minimum investment return. Enter 5% of line 5	6	3,072.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at foreign organizations check here   X and do not complete this part )	nd certain	
1	Minimum investment return from Part X, line 6	1	,
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI )	] ]	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	·
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Pź	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	38,083.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	38,083.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	38,083.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the	section
	4940(e) reduction of tax in those years		

Form **990-PF** (2015)

Part XIII Undistributed Income (se	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015			<del>11</del> 111	1 7 40 1 1 1
a Enter amount for 2014 only				
b Total for prior years				,
3 Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010				
<b>b</b> From 2011				
<b>c</b> From 2012				
d From 2013				
<b>e</b> From 2014				
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$				
a Applied to 2014, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior			77	
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount				
must be shown in column (a); the same amount must be shown in column (a) )  6 Enter the net total of each column as				
indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract				
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable				
amount - see instructions				
e Undistributed income for 2014 Subtract line	······································			
4a from line 2a Taxable amount - see instr			, <u>,</u>	
f Undistributed income for 2015 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	<u> </u>		<u> </u>	
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a		<u>, , , , , , , , , , , , , , , , , , , </u>		·· ·// ······
O Analysis of line 9				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				<b>!</b>

### NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 🕨 🗓 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

COURSE IN MIRACLES SOCIETY 47-0828994 Form 990-PF (2015) Page 11 Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ARMANDO BRONS NONE N/A BOOK TO BE USED FOR PERSONAL SPIRITUAL LLANO BONITO JOURNEY/STUDY SANTA MARIE TORRE, PANAMA, PANAMA 137. 300,1A BOOK TO BE USED FOR DEVORSS & COMPANY NONE N/A PERSONAL SPIRITUAL PO BOX 1389 JOURNEY/STUDY 63. CAMARILLO, CA 93011 EDIE JOUSKY NONE N/A BOOK TO BE USED FOR 450 HADDON AVE, C-1 PERSONAL SPIRITUAL JOURNEY/STUDY 9. COLLINGSWOOD, NJ 08108 BOOK TO BE USED FOR GIRON BOOKS NONE N/A PERSONAL SPIRITUAL 2141 W 21ST ST JOURNEY/STUDY CHICAGO, IL 60608 7. JACKIE OKUN NONE N/A BOOK TO BE USED FOR 11125 WOOLWORTH PLAZA PERSONAL SPIRITUAL OMAHA, NE 68144 JOURNEY/STUDY 16. SEE CONTINUATION SHEET(S) 335. Total ➤ 3a b Approved for future payment NONE

0.

**▶** 3b

Total

Program service revenue  a b c d e f g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments		(b) Amount	Exclusion code	(d) Amount	Related or exempt function income
a b c d e f g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash	code	Amount		Amount	function income
b					
c d e f g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash					
d e t g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash					
e  f  g Fees and contracts from government agencies  Membership dues and assessments  Interest on savings and temporary cash	1				
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash					· · · · · · · · · · · · · · · · · · ·
Membership dues and assessments Interest on savings and temporary cash					···
Membership dues and assessments Interest on savings and temporary cash					
Interest on savings and temporary cash					
•	1 1				
Invactmente					_
IIIVESTITICITIS		<u></u>			5
Dividends and interest from securities				1	· · · · · · · · · · · · · · · · · · ·
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events			<del></del>		
Gross profit or (loss) from sales of inventory					52,933
Other revenue					
a					
b	_				
C		<del></del>			
d					
e					
Subtotal Add columns (b), (d), and (e)		0	•	0.	52,938
Total Add line 12, columns (b), (d), and (e)				13	52,938
ee worksheet in line 13 instructions to verify calculations	3)			<del></del>	
art XVI-B Relationship of Activitie	s to the Accon	plishment of E	xempt P	urposes	
			<del> </del>	· · · · · · · · · · · · · · · · · · ·	<del></del>
ine No. Explain below how each activity for which the foundation's exempt purposes (other t			·A contributed	importantly to the accomp	dishment of
O SALE OF PUBLISHED MAT			E TN M	ITPACTES" WHI	CH IS AN
EDUCATIONAL RESEARCH			E IN P	ITACHES WITH	CII 15 AN
EDOCATIONAL REDEARCH	AND BIODI	AID	-		<del></del>
			<u> </u>		
	*=				
	<del></del>			· · · · · · · · · · · · · · · · · ·	
	<del></del>			·-·-	· · · · · · ·
<del></del>					<del></del>

orm 990-PF		E IN MIRACLES			20334		ige 13
Part XVI	Information Re Exempt Organ		and Transactions a	nd Relationships With Nonc	haritable	•	
1 Did the		rectly engage in any of the followi	no with any other organization	n described in section 501(c) of		Yes	No
		)(3) organizations) or in section 5					
	•	ation to a noncharitable exempt o					
(1) Cas					1a(1)		X
. ,	er assets				1a(2)		Х
b Other tra							
	es of assets to a noncharita	ble exempt organization			1b(1)		X
		ncharitable exempt organization			1b(2)		X
	ntal of facilities, equipment,				1b(3)		Х
	mbursement arrangements				1b(4)		X
	ans or loan guarantees				1b(5)		X
	-	mbership or fundraising solicitati	ons		1b(6)		Х
• •		iling lists, other assets, or paid er			1c		Х
				ays show the fair market value of the good	ds. other ass	ets.	
				e in any transaction or sharing arrangemen			
		other assets, or services received		,			
(a) Line no	(b) Amount involved	(c) Name of noncharitab		(d) Description of transfers, transactions,	and sharing ar	rangeme	ents
		N/A				•	
				1	<u>-</u>		
			<del></del>				
			~~~				
		1					
			1				
<del></del>			· · · · · · · · · · · · · · · · · · ·			•	
	<del></del>		<del></del>				
-							
ın sectio	on 501(c) of the Code (other	tly affiliated with, or related to, on r than section 501(c)(3)) or in sec		ations described	Yes	X	] No
b it "Yes,"	complete the following sche (a) Name of org		(b) Type of organization	(c) Description of relati	onshin		
	N/A	3411241011	(b) Type of organization	(a) becomption or rotati	Onlong		
	N/A_		<del> </del>				
			1				
			<u> </u>		·-··		
Linc	ter penalties of penury. I declare	that I have examined this return includ	ing accompanying schedules and s	statements, and to the best of my knowledge			
Sign Here	belief, it is true, correct, and cor	nplete Declaration of preparer (other th	an taxpayer) is based on all informa	ation of which preparer has any knowledge  President	May the IRS return with the shown below Yes	e prepar (see ins	rer
51	gnature of officer or trustee		Date	Title Check If PT	IN		
Paid	JULIE A MC		signature ()	self- employed	"N 200015	726	
Prepare	r Firm's name ► J A		S. C. C.	Firm's EIN ► 46-			
Use Only	Firm's address ► 30	•				221	
	OM	<u>IAHA, NE 68134-</u>	4713	Phone no 402-	<u>-415-0</u>	334	

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
JOE WOLFE	NONE	N/A	BOOK TO BE USED FOR	
6 OAK COURT			PERSONAL SPIRITUAL	
ORMOND BEACH, FL 32174			JOURNEY/STUDY	5
JOY GREEN	NONE	N/A	BOOK TO BE USED FOR	
3302 BELVEDERE BLVD	[10.12	[ · ·	PERSONAL SPIRITUAL	
OMAHA, NE 68111			JOURNEY/STUDY	
				-
LUZANGELA RIBON	NONE	N/A	BOOK TO BE USED FOR	
5401 S PARK TERRACE AVE., #102D			PERSONAL SPIRITUAL	
GREENWOOD VILLAGE, CO 80111			JOURNEY/STUDY	
MARYLOU KRYWE	NONE	N/A	BOOK TO BE USED FOR	
4819 CROSSETT RD			PERSONAL SPIRITUAL	
GENESEO, NY 14454			JOURNEY/STUDY	
MONICA CARRADORI	NONE	N/A	BOOK TO BE USED FOR	
5304 AVALON WAY			PERSONAL SPIRITUAL	
BLOOMINGDALE, NJ 07403			JOURNEY/STUDY	
PAMELA WHITMAN 31 VENTNOR AVE	NONE		BOOK TO BE USED FOR PERSONAL SPIRITUAL	
MARMORA NJ 08223			JOURNEY/STUDY	9
, 10 00110			500.2.21, 51051	
STUART WALKER	NONE		BOOK TO BE USED FOR	
2269 SACRAMENTO ST			PERSONAL SPIRITUAL	
SAN FRANCISCO, CA 94115			JOURNEY/STUDY	(
THOMSON REUTERS	NONE		BOOK TO BE USED FOR	
610 OPPERMAN DR			PERSONAL SPIRITUAL	
EAGAN, MN 55123			JOURNEY/STUDY	
VIRGINIA PRICE	NONE		BOOK TO BE USED FOR	
5800 OLD BILL COOK RD			PERSONAL SPIRITUAL	
ATLANTA, GA 30349			JOURNEY/STUDY	<u>;</u>
Total from continuation sheets				103

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www ws.qov/form990

OMB No 1545-0047

2015

Name of the organization

Employer identification number

C	OURSE IN MIRACLES SOCIETY	47-0828994
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> )(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor	
Special Rules		
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou 7, line 1. Complete Parts I and II.	, or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, enter purpose. Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled make the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because le, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000. If this box s, charitable, etc.,
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fit the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Employer identification number

## COURSE IN MIRACLES SOCIETY

47-0828994

Part Contributors (see instructions). Use duplicate copies of Part I if additional s
--------------------------------------------------------------------------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	ARMANDO BRONS  LLANO BONITO SANTA MARIA TORRE, PANAMA, PANAMA 300, 1A	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)

Employer identification number

## COURSE IN MIRACLES SOCIETY

47-0828994

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	
			AAA AAA EE

ime of organ	nization		Employer Identification number			
OURSE Part III	completing Part III, enter the total of exclusively religiou	s, chantable, etc , contributions of \$1,000 c	47-0828994 d in section 501(c)(7), (8), or (10) that total more than \$1,000 for owing line entry. For organizations or less for the year (Enter this info once).			
3 No. 1	Use duplicate copies of Part III if addition	al space is needed.	<del></del>			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-	Transferee's name, address, a	(e) Transfer of gi	ft  Relationship of transferor to transferee			
-	Transièree s name, address, ai		nelationship of transferor to transferee			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-	Transferee's name, address, a	(e) Transfer of gi	ft  Relationship of transferor to transferee			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	Transferee's name, address, a	(e) Transfer of gi	ft  Relationship of transferor to transferee			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-	(e) Transfer of gift					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
-						

FORM 990-PF	INTEREST	ON	SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE					(A) EVENUE R BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	;
TD AMERITRAD	E		-		5.		5.		5.
TOTAL TO PAR	T I, LINE	3	-		5.		5.		5.

FORM 990-PF	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10		STATEMENT 2
INCOME			
1. GROSS RECEIPTS 2. RETURNS AND ALLOWAN 3. LINE 1 LESS LINE 2	ICES	87,434	87,434
	(LINE 15)	34,501	52,933
6. OTHER INCOME			
7. GROSS INCOME (ADD L	JINES 5 AND 6)		52,933
10. COST OF LABOR	ED	86,109 48,100	
11. MATERIALS AND SUPPL 12. OTHER COSTS 13. ADD LINES 8 THROUGH		10,536	144,745
14. INVENTORY AT END OF 15. COST OF GOODS SOLD	YEAR (LINE 13 LESS LINE 14)	110,244	34,501

FORM 990-PF COST	OF GOODS SO	LD - OTHER COS	STS S	TATEMENT 3
DESCRIPTION				AMOUNT
SHIPPING BOOKS GIVEN AWAY AT COST STORAGE COSTS			_	6,780. -335. 4,091.
TOTAL OTHER COSTS			<del></del>	10,536.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	8,552.	0.	3,420.	5,102.
TO FORM 990-PF, PG 1, LN 16B	8,552.	0.	3,420.	5,102.
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATIVE SERVICES	12,000.	0.	4,800.	7,200.
TO FORM 990-PF, PG 1, LN 16C	12,000.	0.	4,800.	7,200.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVERTISING COMPUTER DATA/SERVICES PAYPAL SERVICE FEES OFFICE SUPPLIES TELEPHONE TRANSLATION BANK CHARGES	43,039. 2,391. 724. 837. 3,175. 5,659. 105.	0. 0. 0. 0.	39,902. 0. 0. 0. 0.	3,175. 5,659.

COURSE IN MIRACLES SOCIE	TY			47-0828994
INSURANCE TAXES/FEES	 476 31			
TO FORM 990-PF, PG 1, LN 2	56,437	0.	39,902	. 16,532.
FORM 990-PF DEPRECIATION	OF ASSETS NO	T HELD FOR INV	ESTMENT	STATEMENT 7
DESCRIPTION		ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
COMPUTER HP LAPTOP	373. 902.	373. 383.	0. 519.	
TO 990-PF, PART II, LN 14	1,275.	756.	519.	550.
FORM 990-PF	OTHER LI	ABILITIES		STATEMENT 8
DESCRIPTION		ВО	Y AMOUNT	EOY AMOUNT
SALES & USE TAX LIABILITY		<del></del>	54.	37.
TOTAL TO FORM 990-PF, PART	II, LINE 22		54.	37.

	ST OF OFFICERS, DID FOUNDATION MANAGE	STATEMENT 9		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
THOMAS E WHITMORE 7602 PACIFIC ST, STE 200 OMAHA, NE 68114	PRESIDENT/DIRECTION 10.00	CTOR 0.	0.	0.
JANAKI JOY GREEN 3302 BELVEDERE BLVD OMAHA, NE 68111	SECRETARY 20.00	0.	0.	0.
PEGGY HOWLAND 1302 E MACARTHUR RD #101 WICHITA, KS 67216-4236	BOARD MEMBER 1.00	0.	0.	0.
ARMANDO BRONS LLANO BONITO SANTA MARIA TORRE, PANAMA, PANAMA 300	VICE PRESIDENT 2.00	0.	0.	0.
KAREN MONTAGUE 8622 PINKNEY ST OMAHA, NE 68134	TREASURER 10.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.
FORM 990-PF SUMMARY OF DIF	RECT CHARITABLE AC	CTIVITIES	STATI	EMENT 10
ACTIVITY ONE  DISTRIBUTION OF "JESUS COURSE OF TEXT CONSIDERED TO BE THE "THIRD				

DISTRIBUTION OF "JESUS COURSE OF MIRACLES" - A SCRIPTURAL TEXT CONSIDERED TO BE THE "THIRD TESTAMENT" OF CHRISTIANITY. BOOKS DONATED TO INDIVIDUALS, PRIVATE ORGANIZATIONS, CHARITIES

TO FORM 990-PF, PART IX-A, LINE 1 52,938.