EXTENDED TO NOVEMBER 15, 2 Return 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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

	Depar	tmant of the Treasury			social security numbers on			1 2017
		tment of the Treasury	<u> </u>	Go to www.	rs.gov/Form990PF for inst		ormation.	Open to Public Inspection
		ne of foundation	or tax year beginning			, and ending	A Employer identification	number
	C	OURSE IN	MIRACLES S	OCIETY	,		47-0828994	<u>. </u>
	Num	ber and street (or P O	oox number if mail is not de	ivered to street	address)	Room/suite	B Telephone number	
			IC STREET			200	402-391-24	
03		or town, state or pr MAHA, NE	ovince, country, and ZIF 68114 – 540		ostal code		C If exemption application is p	ending, check here
12	G C	heck all that apply.	Initial return		Initial return of a fo	ormer public charity	D 1 Foreign organizations	s, check here
07			Final return		Amended return		2 Foreign organizations me	eting the 85% test
			Address cha		Name change		2 Foreign organizations me check here and attach co	imputation
	H C	heck type of organiz Section 4947(a)(1	ation: X Section) nonexempt charitable		kempt private foundation Other taxable private founda	ation 63	E If private foundation sta under section 507(b)(1)	
			assets at end of year	J Account	-	Accrual	F If the foundation is in a	60-month termination
		om Part II, col (c), I		اه لـــا	ther (specify)	- \	under section 507(b)(1)	(B), check here
	<u> </u>			(Part I, colur	nn (d) must be on cash basi			(4) =
	Ра	The total of amo	evenue and Expenses ounts in columns (b), (c), and al the amounts in column (a)	(d) may not)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	İ		gifts, grants, etc., receiv		14,041.			
	ĺ	2 Check	of the foundation is not required to	attach Sch B	100	100	100	G = 3 = 1 = 1 .
	-	3 cash investments	•		190.	190.	190.	STATEMENT 1
	}		interest from securities					
		5a Gross rents b Net rental income					<u> </u>	<u> </u>
	j	•	from sale of assets not on II	ne 10	,			
	힐	b Gross sales price assets on line 6a		10 10		<u> </u>		
	Revenu		ncome (from Part IV, line 2)	Λ.	<u> </u>	.0.		
	ا ته	8 Net short-term	capital gain	\square			0.	
		9 Income modifi		, ,				
		10a Gross sales less and allowances	<u> </u>	<u>8,176.</u>				STATEMENT 2
2019		b Less Cost of goo	ods sold 5	1,784.		<u>.</u>		STATEMENT 3
?	J	c Gross profit or	(loss)		66,392.		66,392.	
0 3	- 1	11 Other income			00 600	100	66 500	
~	$\overline{}$	12 Total Add line			80,623.	190.	66,582.	0.
	- 1		officers, directors, trustees,	etc	U •			<u> </u>
(P		14 Other employe15 Pension plans,	e salaries and wages					
Ш	es	16a Legal fees	cripioyee benefits					
Z	ens	b Accounting fee	s ST	MT 4	8,636.	0.	5,182.	3,454.
A	X X	c Other profession	onal fees ST	MT 5	12,000.	0.	7,200.	4,800.
SCANNED	Administrative Expenses	17 Interest	RE	CEIVE	24.	0.	0.	24.
40	trat	18 Taxes		SEIVE	D 7	·· <u>-</u>		
	SIL	19 Depreciation a	nd depleted		180.	0.	180.	
		20 Occupancy	▼ NOV	1 6 2018	9 12,058. 728.	0.	7,235.	4,823.
	Ϋ́	21 Travel, confere	nces, and meetings		1 1 0) 	0.	0.	728.
	10	22 Printing and pi	inces, and meetings	M. d.IT	55,693.	0.	46,785.	8,908.
		zo omor omponed	2	西で	25,093.	<u> </u>	40,765.	0,300.
	era		g and administrative I lines 13 through 23		89,319.	0.	66,582.	22,737.
	ဝ	25 Contributions,			116.			116.
	J		s and disbursements					
		Add lines 24 a			89,435.	0.	66,582.	22,853.
		27 Subtract line 2						
		a Excess of revenue	e over expenses and disbur	sements	-8,812.			
		b Net investmen	t income (if negative, ente	r -0-)				
		c Adjusted net i	ncome (if negative, enter -0) -)			0.	

159,067.

Form **990-PF** (2017)

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

See the Part VI instructions

	1990-PF (2017) COURSE IN MIRACLES SOCIETY			<u>828994</u>		Page 4
Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 49	<u>48 - s</u>	see instru	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check hore and enter "N/A" on line 1.					
	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%	L	1			4.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). J		ĺ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	<u> </u>	2			0.
3	Add lines 1 and 2	L	3_	<u></u>		4.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	<u> </u> _	4			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	L	5			4.
6	Credits/Payments:					
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a	0.				
b	Exempt foreign organizations - tax withheld at source	0.				
C	Tax paid with application for extension of time to file (Form 8868)	0.	İ			
d	Backup withholding erroneously withheld 6d	0.				
7	Total credits and payments. Add lines 6a through 6d		7			_0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_	8			<u>0.</u>
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	> _	9			<u>4.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	> _	10			
	Enter the amount of line 10 to be. Credited to 2018 estimated tax		11			
	rt VII-A Statements Regarding Activities				15.6	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inte	rvédě iu		<u> </u>	Yes	No
	any political campaign?			1 <u>a</u>		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the	definitio	วท	1b	 	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or					
	distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?			1c	 	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					·
	(1) On the foundation. > \$ (2) On foundation managers > \$	0.			1	1
е	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		<u>X</u>
	If "Yes," attach a detailed description of the activities.			ļ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpora	ion, or		1.		,,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N7 /	3 4a	 	<u> </u>
	If "Yes," has it filed a tax return on Form 990-T for this year?		N/.			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	}	×
	If "Yes," attach the statement required by General Instruction T			İ		
ь	Are the requirements of section 508(e) (relating to sections 1911 through 1915) satisfied either:				1	
	By language in the governing instrument, or Due to be able to a block that the second of t	otata la		[
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the	State ia	,vv	١,	X	
7	remain in the governing instrument? Did the foundation have at least \$5,000 is except at any time during the year? If "Yee " complete Part II, and (a), and Part YV.			<u>6</u> 7	X	<u> </u>
′	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV				_^	
0.	Enter the states to which the foundation reports or with which it is registered. See instructions. NONE				Į	
01	Enter the states to which the foundation reports or with which it is registered. See instructions. NONE					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			-]	
U	of each state as required by General Instruction G? If "No," attach explanation			8b	X_	
ŋ	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	r calend	lar	0.0	 -	
J	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	. 53,5110		9	x	
10	Did any parcage bacome cubetantial contributors during the tay year?			10	<u> </u>	Y

Form **990-PF** (2017)

	n 990-PF (2017) COURSE IN MIRACLES SOCIETY 47-082	8994	<u>. </u>	Page 5
P	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			}
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	<u> </u>	<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?			
	If "Yes," attach statement. See instructions	12_		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► JCIM.NET	01 0	400	
14	The books are in care of ► THE FOUNDATION Telephone no. ► 402-3			
40	Located at ► 7602 PACIFIC STREET, STE 200, OMAHA, NE ZIP+4 ►6	0114	- 54	 0
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	N	- / A	· Ш
10	and enter the amount of tax exempt interest received or accrued during the year At any time during selectors 2017, did the foundation have an interest in an apparatus or other authority every health.		Yes	Nο
10	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	165	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16	L	<u> </u>
	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
18	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)	Ì		
	a disqualified person?	ĺ		
	(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	1		
	(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)?			
	(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		j j	
	termination of government service, if terminating within 90 days.)			
t	olf any answer is "Yes" to 1a(1)-(6), did any 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	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	ŀ		
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	Ì		
	before the first day of the tax year beginning in 2017?	<u>1c</u>		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	}		
	defined in section 4942(j)(3) or 4942(j)(5)).			
8	A At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017?			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
ľ	Arc there any years listed in 2a for which the foundation is not applying the provisions of section 1912(a)(2) (relating to incorrect	ĺ	i i	
	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	۸		
	·	2b	 	
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
36	during the year? Yes X No			
	of "Yes," did it have excess business holdings in 2017 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 2017.) N/A	Зь		
4:	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	<u> </u>		
·	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
		orm 99 0)-PE	

Form 990-PF (2017) COURSE IN MIRACLES SOCIE Part VII-B Statements Regarding Activities for Which I	TY	Poguirod /	47-08289	994	F	Page 6
	FORM 4720 Way be I	nequired (contin	uea)		Yes	No
 5a During the year, did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence logiciation (section) (2) Influence the outcome of any specific public election (see section 4955); of any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance? See instructions relying on a current notice regarding disaster assistance, check if the answer is "Yes" to question 6a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? 	n 1945(e))? or to carry on, directly or indirectly or educational purposes, or indirectly or indirec	ectly, ectly, Ye Ye for In Regulations I/A Ye	es X No es X No es X No es X No es X No es X No es X No	5b	Yes	No
b Did the foundation, during the year, pay premiume, directly or indirectly, on a p	ersonal benefit contract?		.3 (110	6h		X
If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attributed the foundation About Officers, Directors, Truston Paid Employees, and Contractors	helter transaction?		s X No N/A	7b_		,
List all officers, directors, trustees, and foundation managers and t	heir compensation.		_ _			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	ac	e) Expe count, allowar	other
SEE STATEMENT 9		0.	0			0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."				
(a) Name and address of each employee paid more than \$50,000 NONE	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	l aò	e) Expo count, allowar	other
Total number of other employees paid over \$50,000						

Form 990-PF (2017) COURSE IN MIRACLES SOCIETY		0828994 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u> </u>	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as the ced, etc.	Expenses
1		
SEE STATEMENT 10		66,582.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		·- <u>-</u>
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1 N/A		
2		
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3		_0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, 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.
þ	Average of monthly cash balances	1b	<u>0.</u> 52,023.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	52,023.
е	Reduction claimed for blockage or other factore 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	52,023.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	780.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	51,243.
6	Minimum investment return Enter 5% of line 5	6	2,562.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here ▼ and do not complete this part.)	d certai	n \
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI.)	.	
C	Add lines 2a and 2b	2c	X
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	(
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	22,853.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or hold for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a_	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>22,853.</u>
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	22,853.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	for the section

Form **990-PF** (2017)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (s	ee instructions)	N/A		
	(\$)	(b)	(c)	(d)
	Corpus	Years prior to 2016	2016	2017
1 Distributable amount for 2017 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only	\			
b Total for prior years:				
,,,				
3 Excess distributions carryover, if any, to 2017	*			
a From 2012		 		Ì
b From 2013		\		
c From 2014		\		
d From 2015	(\		
e From 2016	,			
f Total of lines 3a through e		\		
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$		\		
a Applied to 2016, but not more than line 2a		\	/	
b Applied to undistributed income of prior	•	\ \		
years (Election required - see instructions)			<u> </u>	
c Treated as distributions out of corpus		\ /		1
(Election required - see instructions)		X-		· · · · · · · · · · · · · · · · · · ·
d Applied to 2017 distributable amount				
e Remaining amount distributed out of corpus	·	/ \		
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))		- /		
6 Enter the net total of each column as indicated below				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5			\	
b Prior years' undistributed income. Subtract		1		
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 2016. Subtract line	/			
4a from line 2a. Taxable amount - see instr			\	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must	/		\	
be distributed in 2018		<u> </u>		\
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 2012	/			
not applied on line 5 or line 7	/			
9 Excess distributions carryover to 2018	,			
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2013		}		\
b Excess from 2014				\
c Excess from 2015				\
d Excess from 2016				
e Excess from 2017				\
723581 01-03-18				Form 990-PF (2017)

Form 990-PF (2017) COURSE Part XIV Private Operating Form	IN MIRACLES		A guestion 9)	47-082	8994 Page 10
1 a If the foundation has received a ruling or			A, question 5)		
foundation, and the ruling is effective for			▶ 02/	09/01	
b Check box to indicate whether the found		-			2(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	g touridation described in	Prior 3 years	43420/(3) 01	=\(1)\(\frac{1}{2}\)
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed	\ Xo.	0.	o.	0.	1 % 0.
b 85% of line 2a	0.	0.	0.	0.	
c Qualifying distributions from Part XII,					
line 4 for each year listed	22,853.	22,333.	38,083.	6,264.	89,533.
d Amounts included in line 2c not	22,033.	22,333.	30,003.	0/204.	03,333.
used directly for active conduct of					
exempt activities	0.	0.	o.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities.				ļ.	
-	22,853.	22,333.	38,083.	6,264.	89,533.
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			36,003.	0,204.	09,333.
alternative test relied upon:					
a "Assets" alternative test - enter	159,085.	167,901.	161,151.	145,403.	633,540.
(1) Value of all assets	139,003.	107,901.	101,131.	143,403.	033,340.
(2) Value of assets qualifying	150 005	167,901.	161,151.	145,403.	634,260.
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter	159,805.	107,901.	101,131.	145,403.	034,200.
2/3 of minimum investment return					
shown in Part X, line 6 for each year	}		Ì		0
listed			<u> </u>		0.
c "Support" alternative test - enter:				Ì	
(1) Total support other than gross investment income (interest,	ļ				
dividends, rents, payments on					
securities loans (section					_
512(a)(5)), or royalties)					0.
(2) Support from general public and 5 or more exempt					
organizations as provided in					_
section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from					_
an exempt organization					0.
(4) Gross investment income	190.	5.	5.	101.	301.
Part XV Supplementary Info	rmation (Complet	te this part only i	if the foundation	had \$5,000 or moi	e in assets
at any time during the	ne year-see instri	uctions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who			ributions received by the f	foundation before the close	of any tax
year (but only if they have contributed m	ore than \$5,000). (See se	ection 507(d)(2))			
NONE					
b List any managers of the foundation who			or an equally large portion	n of the ownership of a par	tnership or
other entity) of which the foundation has	a 10% or greater interest	l.			
NONE		. <u> </u>	_ 	··	-
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here 🕨 🔀 if the foundation of					sts for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organizat	tions under other conditi	ons, complete items 2a, b	o, c, and d.	
a The name, address, and telephone numb	er or email address of the	e person to whom applic	ations should be address	ed:	
b The form in which applications should be	submitted and informati	on and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographical	areas, charitable fields,	kinds of institutions, or of	ther factors:	

Part XVI-A **Analysis of Income-Producing Activities**

Enter gros	s amounts unless otherwise indicated.	Unrelated	business income		ided by section 512, 513, or 514	(e)
	m service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
_						
е —		1 !	····]
f —						
g Fee	s and contracts from government agencies			Ţ,		
-	ership dues and assessments					
	t on savings and temporary cash					
ınvestr	nents					190.
4 Divider	ids and interest from securities					
5 Net ren	ital income or (loss) from real estate.			T		
a Det	t-financed property					
	debt-financed property					
	ital income or (loss) from personal					
proper						_
	nvestment income			-		
8 Gain or	(loss) from sales of assets other					
	ventory			İ		
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					66,392.
11 Other r						
a						
е		-				
12 Subtot	al. Add columns (b), (d), and (e)		0		0.	
	Add line 12, columns (b), (d), and (e)				13	66,582.
	sheet in line 13 instructions to verify calculations.)					
Part X			nplishment of E	xemp	t Purposes	
Line No	Explain below how each activity for which in	come is reported in	column (e) of Part XVI-	A contril	buted importantly to the accor	mplishment of
	the foundation's exempt purposes (other tha					
10	SALE OF PUBLISHED MATE	<u>ERIALS-"J</u>	ESUS-COURS	E IN	MIRACLES" WH	ICH IS AN
	EDUCATIONAL RESEARCH A	AND STUDY	AID			
		<u> </u>				
						
		 				
						
						.
	<u> </u>					
		·-·				
						
				_		
				_		

		Exempt Organ	izations				·			
1	Did the or	ganization directly or indi	rectly engage in any	of the following	ig with any other organizati	on described in secti	on 501(c)		Yes	No
	(other tha	n section 501(c)(3) organ	iizations) or in secti	on 527, relatin	g to political organizations?					
a	Transfers	from the reporting founda	ation to a noncharit	able exempt or	ganization of:				!	
	(1) Cash							1a(1)		_X_
	(2) Other	assets						1a(2)		X
b	Other tran	sactions:								
	(1) Sales	of assets to a noncharital	ble exempt organiza	ation				1b(1)		<u>X</u>
	(2) Purch	nases of assets from a no	ncharitable exempt	organization				1b(2)		X
	(3) Renta	al of facilities, equipment,	or other assets					1b(3)		<u>X</u>
	(4) Reim	bursement arrangements						1b(4)		_X_
	(5) Loans	s or loan guarantees						1b(5)		X
	(6) Perfo	rmance of services or me	mbership or fundra	ising solicitatio	ns			1b(6)		_X_
C	Sharing of	f facilities, equipment, ma	ılıng lısts, other ass	ets, or paid em	ployees			_1c	L	_X_
d				_	dule. Column (b) should al				sets,	
					ed less than fair market valu	ie in any transaction	or sharing arrangement, s	how in		
) the value of the goods,					 _			
a)L	ine no	(b) Amount involved	(c) Name o		exempt organization	(d) Description	of transfers, transactions, and s	haring ar	rangeme	nts
				N/A						
										
						 				
		·			<u> </u>					
										
										
				 -						
										
		···								
			<u> </u>							
									_	
						 	_			<u>-</u>
								_		
22	le the four	adation directly or indirect	ly affiliated with or	related to one	or more tax-exempt organi	zations described				
2 a		501(c) (other than section	-		of more tax exempt organi	zations acsorioca	Γ	Yes	X] No
h		omplete the following sche		000 027			_			
		(a) Name of org			(b) Type of organization		(c) Description of relationsh	קוו		
		N/A								
								-		
										
					g accompanying schedules and			the IRS	discuss t	his
Si	gn 🔪 .	eller, it is true, correct, and com	nplete Declaration of p	reparer (other thai	n taxpayer) is based on all inform شــــــــــــــــــــــــــــــــــــ		retu	rn with th wn below	e prepar	er
He	re	Maria W	where		111-12-12	Y resi		Yes Yes] No
	Sign	afture of officer or trustee			Date	Title				
	<u></u>	Print/Type preparer's na	me	Preparer s,s	gnature	Date	Check if PTIN			
_				1/1/		11/1/10	self- employed			
Pa -		JULIE A MC		LANIA	1/1/1/10	11/0//	P00	015	<u> 786</u>	
	eparer	Firm's name ► J A	MCCOY CE	PA , //P . C	. ()	, ,	Firm's EIN ► 46-13	3103	72	
Us	e Only			_//						
		Firm's address ► 30			TE 7					
		OM	AHA, NE 6	<u> 8134-4</u>	713		Phone no. 402-41			
							Fo	rm 99 0)-PF	(2017)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

COURSE IN MIRACLES SOCIETY 47-0828994 Organization type (check one) Filers of: Section: 」 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 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) (2017)

Name of organization

Employer identification number

COURSE IN MIRACLES SOCIETY

47-0828994

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RAPHAELA SAVINO 597B LAKEPOINT DRIVE LAKEWOOD, NJ 08701	\$5,100.	Person X Payroll
(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 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 Noncash (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
		\$	
(a) No. irom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	·		
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
_		s	
(a) No. rom	. (b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	17	\$	 990, 990-EZ, or 990-PF) (

Schedule B	(Form 990)	. 990-EZ.	or 990-PF)	(2017)

Page 4

ame or organ			Employer Identification number
OURSE Part III	the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious,	lumns (a) through (e) and the followi charitable, etc , contributions of \$1,000 or le	47-0828994 n section 501(c)(7), (8), or (10) that total more than \$1,000 for ing line entry. For organizations eas for the year (Enter this info once) \$\\$\\$\$
(a) No. from	Use duplicate copies of Part III if additional (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(2) 1 31 2000 01 3111	(e) esc e. g	
-		(e) Transfer of gift	
 - -	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and	(e) Transfer of gift	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, and	1 ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- -			
_	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
-			

FORM 990-PF	INTEREST	ON	SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE					(A) REVENUE ER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	E
TD AMERITRAD	E		-		190.		190.	19	90.
TOTAL TO PAR	T I, LINE	3	_	-	190.		190.	19	90.

FORM 990-PF	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10		STATEMENT 2
INCOME			
1. GROSS RECEIPTS 2. RETURNS AND ALLOWANC 3. LINE 1 LESS LINE 2 .	ES	118,176	118,176
	LINE 15) LESS LINE 4)	51,784	66,392
6. OTHER INCOME			
7. GROSS INCOME (ADD LI	NES 5 AND 6)		66,392
8. INVENTORY AT BEGINNI 9. MERCHANDISE PURCHASE 10. COST OF LABOR	D	76,022 68,234	
11. MATERIALS AND SUPPLI 12. OTHER COSTS		11,986	156,242
14. INVENTORY AT END OF 15. COST OF GOODS SOLD (104,458	51,784

FORM 990-PF COST	OF GOODS SO	LD - OTHER COS	STS S	TATEMENT 3
DESCRIPTION				AMOUNT
SHIPPING BOOKS GIVEN AWAY AT COST STORAGE COSTS				9,909. -116. 2,193.
TOTAL OTHER COSTS				11,986.
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	8,636.	0.	5,182.	3,454.
TO FORM 990-PF, PG 1, LN 16B	8,636.	0.	5,182.	3,454.
FORM 990-PF C	OTHER 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.	7,200.	4,800.
TO FORM 990-PF, PG 1, LN 16C	12,000.	0.	7,200.	4,800.
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/STRIPE SERVICE FEES OFFICE SUPPLIES TELEPHONE TRANSLATION BANK CHARGES	45,838. 694. 476. 187. 2,824. 4,430. 132.	0. 0. 0. 0. 0.	42,355. 0. 0. 0. 0. 4,430.	694. 476. 187. 2,824. 0.

COURSE IN MIRACLES SOCIETY					47-0828	994
INSURANCE TAXES/FEES DUES/SUBSCRIPTIONS	486. 463. 163.		0. 0. 0.		0. 4	86. 63. 63.
TO FORM 990-PF, PG 1, LN 23	55,693.		0. 46,		785. 8,90	
FORM 990-PF DEPRECIATION OF	ASSETS NOT	HELD FOR	INVEST	MENT	STATEMENT	7
DESCRIPTION		T OR BASIS	ACCUMU DEPREC		BOOK VALU	E
COMPUTER HP LAPTOP		373. 902.		373. 743.	1	0. 59.
TOTAL TO FM 990-PF, PART II, I	LN 14	1,275.		1,116.	1	59. ——
FORM 990-PF	OTHER LIA	BILITIES			STATEMENT	8
DESCRIPTION			BOY A	MOUNT	EOY AMOUNT	
SALES & USE TAX LIABILITY		-		23.		16.
TOTAL TO FORM 990-PF, PART II,	LINE 22	-		23.		16.

TO FORM 990-PF, PART IX-A, LINE 1

	LIST OF OFFICERS, D AND FOUNDATION MANA		STATI	EMENT 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
THOMAS E WHITMORE 7602 PACIFIC ST, STE 200 OMAHA, NE 68114	PRESIDENT/DIRE	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, PAN 300	VICE PRESIDENT 2.00 NAMA	0.	0.	0.
KAREN MONTAGUE 8622 PINKNEY ST OMAHA, NE 68134	TREASURER 10.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	GE 6, PART VIII	0.	0.	. 0.
FORM 990-PF SUMMARY OF	DIRECT CHARITABLE A	CTIVITIES	STATI	EMENT 10
ACTIVITY ONE				
DISTRIBUTION OF "JESUS COURSE TEXT CONSIDERED TO BE THE "TH BOOKS DONATED TO INDIVIDUALS, CHARITIES	IRD TESTAMENT" OF CH	RISTIANITY.		
			EXI	PENSES

66,582.