# INSTRUCTIONS FOR FILING SOCIETY OF BIBLICAL LITERATURE FORM 990 - EXEMPT ORGANIZATION FOR THE PERIOD ENDED JUNE 30, 2010

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SIGNATURE...

THE ORIGINAL RETURN SHOULD BE SIGNED (USING FULL NAME AND TITLE) AND DATED BY AN AUTHORIZED OFFICER OF THE ORGANIZATION.

FILING...

THE SIGNED RETURN SHOULD BE FILED ON OR BEFORE FEBRUARY 15, 2011 WITH...

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0027

PAYMENT OF TAX...

NO PAYMENT OF TAX IS REQUIRED.

THE RETURN SHOULD BE SENT CERTIFIED MAIL, RETURN RECEIPT REQUESTED.

AN ADDITIONAL COPY OF THE RETURN SHOULD BE FILED WITH: GEORGIA DEPARTMENT OF REVENUE P.O. BOX 740395 ATLANTA, GA 30374-0395

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# INSTRUCTIONS FOR FILING SOCIETY OF BIBLICAL LITERATURE FORM 990T - EXEMPT ORGANIZATION BUSINESS RETURN FOR THE PERIOD ENDED JUNE 30, 2010

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#### SIGNATURE...

THE ORIGINAL RETURN SHOULD BE SIGNED (USING FULL NAME AND TITLE) AND DATED ON PAGE 2 BY AN AUTHORIZED OFFICER OF THE ORGANIZATION.

#### FILING...

THE SIGNED RETURN SHOULD BE FILED ON OR BEFORE MAY 16, 2011 WITH...

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0027

#### PAYMENT OF TAX...

NO PAYMENT OF TAX IS REQUIRED.

THE RETURN SHOULD BE SENT CERTIFIED MAIL, RETURN RECEIPT REQUESTED.

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### Form **990**

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A F	or th	e 2009	calen	dar year, or tax year beginning 07/01, 2009, and ending	<u> </u>	0 6	6/30 <b>,20</b> 10
<b>B</b> c	heck if ap	plicable:	Please	C Name of organization SOCIETY OF BIBLICAL LITERATURE		D Employer identif	fication number
	Addre chang		use IRS label or	Doing Business As		23-639071	. 6
	7 1	change	print or	Number and street (or P.O. box if mail is not delivered to street address) Room/	/suite E	E Telephone number	er
	Initial	-	type. See	825 HOUSTON MILL ROAD NE 350		(404) 727-	3100
	Termi		Specific	City or town, state or country, and ZIP + 4		(101) /2/	0100
	Amen		Instruc- tions.		١,	Gross receipts \$	2 710 500
	return Applic			ATLANTA, GA 30329		Gross receipts \$	
	pendi	ng		me and address of principal officer: JOHN KUTSKO	'	Is this a group retual affiliates?	rn for Yes X No
			825	HOUSTON MILL ROAD STE 350 ATLANTA, GA 30329	H	<b>H(b)</b> Are all affiliates in	cluded? Yes No
<u> </u>	Tax-ex	cempt sta	atus:	X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527		If "No," attach a lis	st. (see instructions)
J	Websi	te: 🕨	. WWW	SBL-SITE.ORG	H	H(c) Group exemption r	number
K	Form o	of organi	zation:	X Corporation Trust Association Other ▶ L Year of	formation	n: 1980 <b>M</b> State	e of legal domicile: GA
	rt I		nmary				
	1	Briefly	descrit	e the organization's mission or most significant activities:  ETY'S MISSION IS TO FOSTER BIBLICAL SCHOLARSHIP.		TTCTON TC	
e							
anc				MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT, INTELL	LECTU	AL 	
& Governance		GROW	ΙТН <b>,</b>	AND PROFESSIONAL DEVELOPMENT.			
Š	2	Check	this bo	x Fig. if the organization discontinued its operations or disposed of more than 2	25% of it	s net assets.	
ص ص	3	Numbe	er of vo	ting members of the governing body (Part VI, line 1a)		3	14
	4	Numbe	er of inc	lependent voting members of the governing body (Part VI, line 1b)			14
Activities	5						30
Ċţ	6						113
⋖	_						_
		_		nrelated business revenue from Part VIII, column (C), line 12			0
	b	Net un	related	business taxable income from Form 990-T, line 34		7b	0
						Prior Year	Current Year
ø	8	Contrib	outions	and grants (Part VIII, line 1h)		97,711.	
Revenue	9	Progra	m serv	ice revenue (Part VIII, line 2g)	_	1,951,767.	1,857,318.
	10			come (Part VIII, column (A), lines 3, 4, and 7d)		20,212.	17,679.
Œ	11	Other	revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	408,414.	456,646.
	12			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,478,104.	2,494,558.
	13			milar amounts paid (Part IX, column (A), lines 1-3)		7,543.	
	14					0.	
	4-				•		-
Expenses	15			r compensation, employee benefits (Part IX, column (A), lines 5-10)		1,120,056.	
ens	16 a	Profes	sional f	undraising fees (Part IX, column (A), line 11e)		0.	0
ă.	b			ing expenses, Part IX, column (D), line 25) 103,092			
ш	17	Other	expens	es (Part IX, column (A), lines 11a-11d, 11f-24f)		1,559,632.	1,299,717.
	18	Total e	expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	_	2,687,231.	2,365,716.
	19	Reven	ue less	expenses. Subtract line 18 from line 12		-209,127.	128,842.
or					Be	ginning of Year	End of Year
ets	20	Total a	issets (	Part X, line 16)	_	3,749,590.	3,989,123.
SS	21					1,341,050.	1,285,629.
Net Assets or Fund Balances	21				•		
				fund balances. Subtract line 21 from line 20		2,408,540.	2,703,494.
Pa	rt II	Sig	natur	Block			
				es of perjury, I declare that I have examined this return, including accompanying schedul			
		and b	ellet, it	is true, correct, and complete. Declaration of preparer (other than officer) is based on a	all inform	nation of which pre	eparer nas any knowledge.
S	ign						
Н	ere		Signatur	e of officer		Date	
		•	Tyne or	print name and title			
		<del>L'</del>	71		eck if	Prenarer	's identifying number
Paid	ı		arer's	self-	-	(see instr	ructions)
	oarer's	signa			ployed		P00746804
	Only	Firm's	name (demploye	oryours SMITH & HOWARD, P.C.		EIN ►	58-1250486
J36	July		ss, and z		3 F	Phone no.	404-874-6244
May	the IF	RS disc	uss this	return with the preparer shown above? (see instructions)			X Yes No

P	art III Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission:	
	ATTACHMENT 3	
_	Did the organization undertake any significant program services during the year which were not listed on	
_		
	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.	
2	Did the organization cease conducting, or make significant changes in how it conducts, any program	
3		Yes X No
	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exp	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	or grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	a (Code:) (Expenses\$ <sub>729,479</sub> _ including grants of \$) (Revenue \$	899,630.
	CONGRESSES - TWO MAJOR ANNUAL CONFERENCES ARE HELD EACH YEAR - ONE	
	IN THE UNITED STATES AND ONE ABROAD, AS WELL AS REGIONAL MEETINGS	
	WHICH ARE DISCUSSED BELOW. CONFERENCES ARE AN IMPORTANT VENUE FOR	
	MEMBERS AS THEY PROVIDE OPPORTUNITIES FOR INTELLECTUAL AND	
	PROFESSIONAL DEVELOPMENT, FACILITATING BROAD DISCUSSIONS, AND	
	ENABLE MEMBERS TO COLLABORATE WITH MANY INSTITUTIONS AND	
	ORGANIZATIONS. THEY PROVIDE AN OPPORTUNITY TO REACH A DIVERSE	
	AUDIENCE AND IN MANY CASES RESOURCES ARE DEVELOPED AS A RESULT OF	
	THESE CONFERENCES.	
	o (Code:) (Expenses\$ <sub>858,473</sub> . including grants of \$) (Revenue \$	000 075 )
.~	PUBLICATIONS - SBL IS A MEMBER OF THE ASSOCIATION OF AMERICAN	
	UNIVERSITY PRESSES THAT HELPS SET STANDARDS REGARDING PEER	
	REVIEWED PUBLICATIONS. SBL PUBLICATIONS IS INVOLVED IN EVERY	
	PHASE OF PRODUCING BOOKS; ACQUISITION, DEVELOPMENT, PRODUCTION,	
	AND MARKETING. THIS SUPPORTS PROFESSIONAL DEVELOPMENT,	
	FACILITATES OPEN DISCUSSION, ENCOURAGES BIBLICAL RESEARCH AND	
	·	
	STUDY, AND IS ADDRESSED TO DIVERSE AUDIENCES WITH A FOCUS ON	
	ACADEMIA. OVER 133 MEMBERS VOLUNTEER THEIR TIME TO ASSIST IN THIS	
	PROGRAM AREA MAKING IT POSSIBLE FOR OUR PUBLICATIONS PROGRAM TO	
	END THE YEAR IN THE BLACK.	
4c	c (Code:) (Expenses\$227,061. including grants of \$1,000. ) (Revenue \$	29 <b>,</b> 886)
	PROFESSIONS - PROFESSIONS INCLUDE A BROAD RANGE OF ACTIVITIES THAT	
	SUPPORT PROFESSIONAL DEVELOPMENT, FACILITATE OPEN DISCUSSION, AND	
	ENCOURAGE THE STUDY OF THE BIBLE. SBL COLLABORATES WITH THE	
	NATIONAL HUMANITIES ALLIANCE AND AMERICAN COUNCIL OF LEARNED	
	SOCIETIES; ORGANIZATIONS THAT FUNCTION AS A CONSORTIUM FOR	
	HUMANITIES ACTIVITIES. IN ADDITION, SBL HAS ESTABLISHED	
	PARTNERSHIPS WITH CONSORTIA OF COLLEGES, UNIVERSITIES, AND	
	SEMINARIES AS WELL AS WITH INDIVIDUAL HIGHER EDUCATION	
	INSTITUTIONS.	
<b>4</b> d	d Other program services. (Describe in Schedule O.)  ATTACHMENT 4	
-	(Expenses \$ $_{345,906}$ including grants of \$ 0. ) (Revenue \$ $_{441,720}$ .)	
46	Total program service expenses ► 2,160,919.	
<u>~~</u>	2,100,7010.	F 000 (2000)

Part	Checklist 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Χ
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes,"complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	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.			
•	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.			
	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.			
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X.</i>			
	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes,"			
12	complete Schedule D. Parts XI, XII, and XIII.	12	Х	
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year?  Yes No	12	Λ	
147	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	140		- 21
D	business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140	Δ.	
10	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		Χ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		Λ
10	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	40		v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		X
17		47		v
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		3.7
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		3.7
20	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Χ

Form **990** (2009)

#### Part IV **Checklist of Required Schedules** (continued) Did the organization report more than \$5,000 of grants and other assistance to governments and organizations Χ 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the Χ 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 Χ 24 a 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 question 25 24a Χ b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Χ with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 25b 990-EZ? If "Yes," complete Schedule L. Part I Χ 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Χ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II, Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? Χ 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV...... b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Χ Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Χ 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Χ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Χ 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, Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38

Form **990** (2009)

	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
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 . 2a 30			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
	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		X
b	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.	F		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Λ
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5c		
6.0	Prohibited Tax Shelter Transaction?	30		
ба	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?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		21
D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD.		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
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?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders  Cross income from other courses (Pa not not amounts due or noid to other courses against			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
10 -	amounts due or received from them.)  Section 4047(a)(4) per exempt shoritable trusts to the ergonization filing Form 000 in liquid Form 10412.	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b	124		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		3.7
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		X
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	enue Code.)		Yes	No
		40-	163	X
	Does the organization have local chapters, branches, or affiliates?	10a		Λ.
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		
4.4	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	Х	
44.6	form?	11	21	
11 A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X	
12a b	Does the organization have a written conflict of interest policy? If "No," go to line 13	120		
D	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy?   If "Yes,"	120		
·	describe in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Χ
	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 taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_GA,			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	)		
	available for public inspection. Indicate how you make these available. Check all that apply.			
	X Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ► SUSAN MADARA 825 HOUSTON MILL ROAD SUITE 350 ATLANTA, GA 30329			

# 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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

<b>(A)</b> Name and Title	(B) Average	(C) Position (check all that apply)						( <b>D</b> ) Reportable	(E) Reportable	<b>(F)</b> Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
LOVEDAY C. A. ALEXANDER										
MEMBER	1.00	Х								
CHERYL B. ANDERSON MEMBER	1.00	Х								
BRUCE C. BIRCH MEMBER & CHAIR	1.00	Х								
JEFFREY K. KUAN MEMBER	1.00	Х								
FERNANDO F. SEGOVIA MEMBER	1.00	Х								
L. MICHAEL WHITE MEMBER AND SECRETARY	1.00	Х								
FRANCISCO LOZADA MEMBER	1.00	Х								
ADELE REINHARTZ MEMBER	1.00	Х								
JOHN STRONG MEMBER	1.00	Х								
VINCENT WIMBUSH MEMBER AND PRESIDENT	1.00	Х								
PHILIP F. ESLER MEMBER	1.00	Х								
ARCHIE CHI-CHUNG LEE MEMBER	1.00	Х								
CAROL NEWSOM MEMBER AND VICE PRESIDENT	1.00	Х								
CHRISTINE M. THOMAS MEMBER	1.00	Х								
KENT HAROLD RICHARDS TREASURER & EXECUTIVE DIRECTOR	55.00			Х				86,952.	0.	63,657.

Form **990** (2009)

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Part VII Section A. Officers, Directors, Tru	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees(continued)												
(A) Name and title	(B) Average hours per		(C) sition (check all that					(D)  Reportable compensation	(E) Reporta compensa			( <b>F)</b> timated ount of	
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from rela organizat (W-2/1099-I	ted ions	comp fro orga and	other pensation om the anization related nization	on ed
<ul><li>1b Total</li><li>2 Total number of individuals (including but not lim</li></ul>	nited to thos	se liste	ed a				ceiv	86,952. red more than \$100	,000 in	0.		63,	657.
reportable compensation from the organization	<u> </u>	(	)									Yes	No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3	163	X
For any individual listed on line 1a, is the the organization and related organizations	sum of	report	table	e c	om	pensa	tion	and other comp	pensation f	rom			
<ul><li>individual</li></ul>											4	X	
services rendered to the organization? If "Yes,"											5		Χ
Section B. Independent Contractors     Complete this table for your five highest compensation from the organization.	compensate	ed in	dep	end	lent	cont	rac	tors that received	I more tha	ın \$100	0,000	of	
(A)  Name and business addr	ress							(B) Description of ser	vices		(C)		
NONE													
							+						
							+						
2 Total number of independent contractors (in							e I	isted above) who	received				

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art	: VIII	Statement of Revenue			23-6390716		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 514
Program Service Revenue and other similar amounts	1a	Federated campaigns 1	a				
<u>ב</u>	b	Membership dues 1	b				
amo	С	Fundraising events 1	С				
<u>a</u>	d	Related organizations 1	d				
Ē	е	Government grants (contributions)	e				
je l	f	All other contributions, gifts, grants,					
≢∣			f 162,915.				
and	g h	Noncash contributions included in lines 1a-1f: \$\footnote{Total}\$. Add lines 1a-1f		162,915.			
e		Total. Add lines 1a-11	Business Code	162,915.			
	20	JOINT ANNUAL MEETING / TRADE SHOW	611600	895,153.			895,15
Se	2a b	MARKETING REVENUE - TRADE SHOWS	541800	115,475.			115,4
9	C	SUBSCRIPTION REVENUE	323100	370,586.	370,586.		110/1
Sel.	d	MEMBERSHIP DUES	611600	441,720.	441,720.		
	e	MARKETING REVENUE - JOURNAL ADVERISI	NG 541800	34,384.			34,38
<u> </u>	f	All other program service revenue					
ž	g	Total. Add lines 2a-2f		1,857,318.			
	3	Investment income (including dividends, int					
		other similar amounts) ATTACHMEN	ĭŢ 5 <b>▶</b>	24,798.			24,79
	4	Income from investment of tax-exempt bon	d proceeds [6] ▶	219.			2
	5	Royalties		105,129.			105,1
		(i) Real	· · · ·				
	6a	Gross Rents					
	b	Less: rental expenses 157,					
	C	Rental income or (loss)					
	d	Net rental income or (loss) (i) Securitie		-53,376.			-53,3
	7a	Gross amount from sales of	0.				
	<b>L</b>	assets other than inventory  Less: cost or other basis	0.				
	b	and sales expenses	7,338.				
	С	Gain or (loss)					
		Net gain or (loss)		-7,338.			-7,33
ע	8a	Gross income from fundraising					
₹		events (not including \$					
Š		of contributions reported on line 1c).					
		See Part IV, line 18	a				
	b	Less: direct expenses					
วี	С	Net income or (loss) from fundraising event	ts	0.			
	9a	Gross income from gaming activities.					
		See Part IV, line 19					
	b	Less: direct expenses					
	C	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less returns and allowances	401 710				
	<b>L</b>						
	b c	Less: cost of goods sold  Net income or (loss) from sales of inventory		370,530.	370,530.		
		Miscellaneous Revenue	Business Code	370,330.	370,330.		
Į.	11a	JOB OPENINGS PUBLICATION	541900	29,886.			29,88
	b	MISC. REVENUE		4,477.	4,477.		
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		34,363.			
- 1	12	Total Revenue. See instructions		2,494,558.	1,187,313.		0. 1,144,33

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must complete	· · · · · · · · · · · · · · · · · · ·	(B)	(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	0.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	1,000.	1,000.		
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors, trustees, and key employees	153,817.	122,333.	15,650.	15,834.
6	Compensation not included above, to disqualified	100/01/.	122,333.	10,000.	10,001.
0	persons (as defined under section 4958(f)(1)) and				
	persons (as defined under section 4930(r)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	722,761.	655,898.	32,493.	34,370.
	Pension plan contributions (include section 401(k)	722,701.	033,030.	32,433.	34,370.
8	and section 403(b) employer contributions)	54,978.	49,285.	3,141.	2,552.
9	Other employee benefits	70,064.	54,780.	7,847.	7,437.
10	Payroll taxes	63,379.	57,124.	3,230.	3,025.
10 11	Fees for services (non-employees):	00,010.	51,124.	3,230.	5,025.
	` ' ' /	0.			
	Management	3,159.	2,827.	166.	166.
	Accounting	40,949.	33,205.	3,799.	3,945.
	Lobbying	0.	33,200.	3,733.	3,310.
	Professional fundraising services. See Part IV, line 17	0.			
	Investment management fees	0.			
	Other	138,660.	134,506.	1,833.	2,321.
12	Advertising and promotion	9,414.	9,414.	2,000.	2,021.
13	Office expenses	43,779.	38,526.	2,332.	2,921.
14	Information technology	97,781.	89,990.	3,039.	4,752.
15	Royalties	37,639.	37,639.		-,
16	Occupancy	42,016.	33,910.	3,904.	4,202.
17	Travel	194,597.	167,810.	15,499.	11,288.
18	Payments of travel or entertainment expenses			20, 200	
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	286,730.	280,971.	2,499.	3,260.
20	Interest	0.	,	,	.,
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	18,570.	14,856.	1,857.	1,857.
23	Insurance	11,508.	9,237.	977.	1,294.
24	Other expenses. Itemize expenses not	,	,		, -
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	PRINTING	152,185.	152,185.		
	DISTRIBUTION COSTS	72,221.	72,221.		
	OTHER EXPENSES	66,773.	65,241.	1,094.	438.
	DUES AND DISCOUNTS	49,263.	47,128.	788.	1,347.
	COMMUNICATION	34,385.	30,762.	1,548.	2,075.
	All other expenses	88.	71.	9.	8.
	Total functional expenses. Add lines 1 through 24f	2,365,716.	2,160,919.	101,705.	103,092.
26	Joint Costs. Check here ► If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	, ,	,,	. ,	,
ICA					

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### Part X Balance Sheet

Pa	irt X	Balance Sheet	(A) Beginning of year		(B) End of year
_	1	Cash - non-interest-bearing		1	<u> </u>
	2	Savings and temporary cash investments	906,455.		986,698.
	3	Pledges and grants receivable, net	400.		1,000.
	4	Accounts receivable, net	64,722.	-	109,233.
	5	Receivables from current and former officers, directors, trustees, key		-	
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	40,265.	8	40,354.
•	9	Prepaid expenses and deferred charges	27,691.	9	28,203.
	10 a	Land, buildings, and equipment: cost or 10a 119,613.			
		other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	42,277.	10c	28 <b>,</b> 557.
	11	Investments - publicly traded securities	680,924.	11	803 <b>,</b> 895.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,986,856.	15	1,991,183.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,749,590.	16	3,989,123.
	17	Accounts payable and accrued expenses	205,597.	17	215,248.
	18	Grants payable		18	
	19	Deferred revenue	1,135,453.	19	1,070,381.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
iab		employees, highest compensated employees, and disqualified			
_		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,341,050.	26	1,285,629.
		Organizations that follow SFAS 117, check here STATE and complete lines 27 through 29, and lines 33 and 34.			
Š	27		2 001 027		2 202 506
<u>a</u>	27	Unrestricted net assets	2,001,937. 123,453.	_	2,202,506. 217,293.
Ва	28 29	Temporarily restricted net assets	283,150.	28	283,695.
pu	29	Permanently restricted net assets  Organizations that do not follow SFAS 117, check here	203,130.	29	203,093.
Net Assets or Fund Balances		and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	2,408,540.	33	2,703,494.
_	34	Total liabilities and net assets/fund balances	3,749,590.	34	3,989,123.

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Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X 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		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		Form	990	(2009)

### **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support** Complete if the organization is a section 501(c)(3) organization or a section

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public Inspection

Name of t	he organizatio	n						Employe	r identificat	ion numl	oer	
SOCIET	Y OF BIB	LICAL LITERA	ATURE						23-63	90716		
Part I	Reason fo	or Public Char	ity Status (All organi	izations m	ust compl	ete this p	oart.) Se	e instruc	tions.			
The orga	nization is no	t a private founda	ation because it is: (For	lines 1 thro	ough 11, ch	eck only c	ne box.)					
1	A church, co	onvention of chur	ches, or association of	churches d	escribed in	sectio	n 170(b)(ʻ	1)(A)(i).				
2	A school de	scribed in section	on 170(b)(1)(A)(ii). (At	tach Sched	ule E.)							
3	A hospital o	r a cooperative h	ospital service organiza	ation descri	bed in se	ction 170	(b)(1)(A)(	iii).				
4	A medical	research organiz	zation operated in co	njunction v	with a hos	pital des	cribed in	section	170(b)(1)(	A)(iii).	Enter	the
		ame, city, and sta										
5	An organiza	ation operated fo	or the benefit of a col	lege or un	iversity ow	ned or o	perated I	by a gove	ernmental	unit des	scribe	ed in
	section 170	(b)(1)(A)(iv). (Co	omplete Part II.)									
6	A federal, st	ate, or local gove	ernment or government	al unit desc	ribed in	section 17	70(b)(1)(A	۸)(v).				
7	An organiza	ation that normal	lly receives a substan	tial part of	its support	from a	governme	ental unit	or from the	ne gene	ral p	ublic
	described in	n section 170(b)(	1)(A)(vi). (Complete F	Part II.)								
8	A communit	y trust described	in section 170(b)(1)(a	<b>A)(vi).</b> (Co	mplete Par	t II.)						
9 X	An organiza	ation that normal	lly receives: (1) more	than 33 1/3	% of its su	ipport froi	m contrib	utions, n	nembership	fees,	and g	gross
	receipts fro	m activities rela	ted to its exempt fun	ctions - su	bject to ce	ertain exc	eptions,	and (2) r	no more th	nan 33 1	/3% (	of its
	support fro	m gross investr	ment income and un	related but	siness taxa	able inco	me (less	section	511 tax)	from b	usine	sses
	acquired by	the organization	after June 30, 1975.	See sectio	n 509(a)(2)	. (Compl	ete Part I	II.)				
10	An organiza	tion organized ar	nd operated exclusively	to test for	public safet	y.See 🧃	section 5	09(a)(4).				
11	An organiza	ation organized	and operated exclusi	ively for th	ne benefit	of, to pe	erform th	e functio	ns of, or	to carry	y out	the
	purposes of	f one or more p	ublicly supported orga	anizations	described i	in section	509(a)(1	1) or sec	tion 509(a	)(2). Se	e <b>se</b> c	ction
	509(a)(3). (	Check the box the	at describes the type of				-					
	<b>а</b> Тур	_		: Typ		-	_			pe III - C		
е	-	_	ertify that the organiz				-					
	persons oth	er than foundati	on managers and oth	er than on	e or more	publicly s	supported	l organiza	ations des	scribed	in sec	ction
	` ' ' '	r section 509(a)(2	,									
f	_		I a written determinat	tion from t	the IRS tha	at it is a	Type I, 7	Гуре II, о	r Type III	support	ing	
		n, check this box										
g			the organization accept	ed any gift	or contribut	ion from a	any of the					
	following pe						_					
			or indirectly controls								Yes	
			erning body of the sup		anization?					11g(i)	<u> </u>	X
		-	erson described in (i) at							11g(ii)	+	Х
_		=	of a person described in							11g(iii)		Х
h		_	tion about the supporte					1				
	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9			(v) Did y	ou notify nization in		ls the	(vii) An	nount port	of
orge	ariizatiori		above or IRC section		document?	col. (i)	of your	(i) organi	zed in the	Jup	port	
			(see instructions))				porť?		.S.?			
				Yes	No	Yes	No	Yes	No			
								-				
Total												
· Otal												

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 23-6390716 Page **2** 

#### Part II 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.) Section A. Public Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support (b) 2006 Calendar year (or fiscal year beginning in) (a) 2005 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 7 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 **Total support.** Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage % Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2008 Schedule A, Part II, line 14 % 15 16a 33 1/3 % support test - 2009. 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 - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, 17a 10%-facts-and-circumstances test - 2009. 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 b 10%-facts-and-circumstances test - 2008. 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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 23-6390716 Page 3

# Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support		,				
C	alendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include						
	any "unusual grants.")	100,998.	48,221.	108,963.	97,711.	162,915.	518,808.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	2,016,376.	2,393,725.	2,374,965.	2,348,603.	2,279,036.	11,412,705.
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						
	furnished by a governmental unit to the						
	, ,						
•	organization without charge						
6	Total. Add lines 1 through 5	2,117,374.	2,441,946.	2,483,928.	2,446,314.	2,441,951.	11,931,513.
7 a	Amounts included on lines 1, 2, and 3						
h	received from disqualified persons  Amounts included on lines 2 and 3	14,060.	11,410.	9,015.	8,765.	11,570.	54,820.
~	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year				3,103.		3,103.
С	Add lines 7a and 7b	14,060.	11,410.	9,015.	11,868.	11,570.	57,923.
8	Public support (Subtract line 7c from						
	line 6.)						11,873,590.
Sec	tion B. Total Support						
C	alendar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	2,117,374.	2,441,946.	2,483,928.	2,446,314.	2,441,951.	11,931,513.
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources	183,168.	268,448.	259,113.	217,088.	234,062.	1,161,879.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	183,168.	268,448.	259,113.	217,088.	234,062.	1,161,879.
11							
	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.) ATCH 1	58,491.	77,649.	88,528.	36,249.	34,358.	295,275.
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	2,359,033.	2,788,043.	2,831,569.	2,699,651.	2,710,371.	13,388,667.
14	First five years. If the Form 990 is for			third, fourth, or			
	organization, check this box and stop here	-					
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2009 (line 8, co	•		(f))		15	88.68%
16	Public support percentage from 2008 Schedu	• •	•			16	88.71%
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 2009 (lin			. column (f))		17	8.68%
18	Investment income percentage from 2008		0.0.47			18	8.34%
	33 1/3 % support tests - 2009. If the oil			on line 14 and			
13 d	17 is not more than 33 1/3 %, check the						. $\square$
L	ii is not more than 33 1/3 %, theth th		ulere. The orga	amzauon quailles	as a publicly	aupporteu organiz	auon 🚩 🔼
D)	32 4/2 % cumport tooto 2000 If the are	anization did not	check a boy an	line 14 or line 10	a and line 16 in	more than 224/0	% and
-	33 1/3 % support tests - 2008. If the orgaline 18 is not more than 331/3 %, check						. $\square$

JSA 9E1221 1.000

23-6390716

Page 4

Schedule A (Form 990 or 990-EZ) 2009

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10;

	or 17b; or Part III, lin					
SCHEDULE A, PART II	I - OTHER INCOME	1		<u>ATT</u>	FACHMENT 1	
DESCRIPTION	2005	2006	2007	2008	2009	TOTAL
OTHER	58,491.	77,649.	88,528.	36,249.	34,358.	295,275.
TOTAL	58,491.	77,649.		36,249.	34,358.	

### Schedule B

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

Name of the organization

Department of the Treasury
Internal Revenue Service

### **Schedule of Contributors**

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

OMB No. 1545-0047

2009

Employer identification number

SOCIETY OF BIBLICAL	LITERATURE	23-6390716
Organization type (check or	ne):	23 0330710
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private for	undation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
, ,	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 S	Special Rule. See
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or one contributor. Complete Parts I and II.	more (in money or
Special Rules		
sections 509(a)(1)	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support to and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	a contribution of the greater
the year, aggregat	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any see contributions of more than \$1,000 for use exclusively for religious, charitanses, or the prevention of cruelty to children or animals. Complete Parts I, II, and	ble, scientific, literary, or
the year, contributi aggregate to more year for an <i>exclusi</i> applies to this orga	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any ions for use exclusively for religious, charitable, etc., purposes, but these contributions that were than \$1,000. If this box is checked, enter here the total contributions that were ively religious, charitable, etc., purpose. Do not complete any of the parts unless anization because it received nonexclusively religious, charitable, etc., contributions.	tributions did not e received during the es the <b>General Rule</b> tions of \$5,000 or more
_	at is not covered by the General Rule and/or the Special Rules does not file Sc	
	nust answer "No" on Part IV, line 2 of its Form 990, or check the box on line H PF, to certify that it does not meet the filing requirements of Schedule B (Form	
For Privacy Act and Paperwork Re	duction Act Notice, see the Instructions Schedul	e B (Form 990, 990-EZ, or 990-PF) (2009)

JSA

for Form 990, 990-EZ, or 990-PF.

# SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

20**09** 

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	or the organization				Employer identification number
	IETY OF BIBLICAL LITERATURE				23-6390716
Pai	Organizations Maintaining Donor Advis the organization answered "Yes" to Form	sed Funds or Other 990, Part IV, line 6	r Siı S	milar Funds or	AccountsComplete if
		(a) Donor advis	sed f	unds	(b) Funds and other accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advis	ors in writing that the	asse	ets held in donor a	ndvised
•	funds are the organization's property, subject to the or	_			Yes No
6	Did the organization inform all grantees, donors, and o		_		
•	used only for charitable purposes and not for the bene				
Pai		e organization ans	wer	ed "Yes" to Form	m 990. Part IV. line 7.
1	Purpose(s) of conservation easements held by the org				
•	Preservation of land for public use (e.g., recreation	•		1	an historically important land area
	Protection of natural habitat	on or pleasure)			a certified historic structure
				Preservation of a	a certified historic structure
2	Preservation of open space	a sublified concentation		untribution in the f	arm of a concentration
_	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	a quaimed conservatio	on cc	onunbulion in the id	orm of a conservation
	easement on the last day of the tax year.				Held at the End of the Year
	Total number of conservation easements				2a
a				1	2b
b	Total acreage restricted by conservation easements				2c
C	Number of conservation easements on a certified history		•	·	2d
d	Number of conservation easements included in (c) acc	•	_		
3	Number of conservation easements modified, transfer	red, released, extingui	isne	d, or terminated b	y the organization during
	the tax year		1	_	
4	Number of states where property subject to conservati				
5	Does the organization have a written policy regarding	•	-		
	violations, and enforcement of the conservation easen				
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing c	onse	ervation easemen	ts during the year
_	Assessment of a constraint and the constitution of the constitution				order or the access of
7	Amount of expenses incurred in monitoring, inspecting	i, and enforcing conse	ervat	ion easements du	ring the year
_	<b>\$</b>				
8	Does each conservation easement reported on line 2(	•	•		1 1 1
_	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?				
9	In Part XIV, describe how the organization reports con			-	
	balance sheet, and include, if applicable, the text of the	•	nızat	tion's financial sta	tements that describes
De	the organization's accounting for conservation easeme		<b>VO 3</b>	011800 01 Oth - 11	Similar Assats
ા	t III Organizations Maintaining Collections Complete if the organization answered "\				Jillilai ASSEIS.
	·				
1a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets held	AS 116, not to repo	rt ir	n its revenue sta	tement and balance sheet works of
	provide, in Part XIV, the text of the footnote to its fina	ancial statements that	t des	scribes these item	is.
b	If the organization elected, as permitted under SF				
	historical treasures, or other similar assets held for provide the following amounts relating to these items	or public exhibition,			
	(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,				
-	following amounts required to be reported under SF				secto for infantolar gain, provide the
а	Revenues included in Form 990, Part VIII, line 1	_			▶ \$
a b	Assets included in Form 990, Part X				► \$
J	7.030to moluudu iiri oiiii 330, Fait A				

23-6390716 Schedule D (Form 990) 2009 Page 2

Par	t III Organizations Maintainin	g Collections o	of Art, Hist	orica	Treasure	s, or	Other Similar	Assets(c	ontinued	<del>(</del> )
_										
3	Using the organization's acquisition, a		ther records	, chec	k any of the	tollo	wing that are a sig	nificant us	se of its	
	collection items (check all that apply):	•		_						
а	Public exhibition		d	_		chang	ge programs			
b	Scholarly research		e		Other					
C	Preservation for future gene									
4	Provide a description of the organizat	tion's collections	and explain	now tr	ney turtner ti	ne or	ganization's exem	ipt purpos	e in	
_	Part XIV.	!:-: 4:	daal!aa		.:-4:					
5	During the year, did the organization							_	٦,,	
_	assets to be sold to raise funds rather								Yes	No
Par	t IV Escrow and Custodial Ar IV, line 9, or reported an a					ansv	wered "Yes" to I	-orm 990	), Part	
	TV, line 9, or reported arra	inount on roini	330, i ait	Λ, ιιιι	21.					
12	le the organization an agent trustee	custo dian or othe	ar intarmadi	ary for	contribution	e or	other assets not			
ıa	Is the organization an agent, trustee, included on Form 990, Part X?			-				Г	X Yes	No
b	If "Yes," explain the arrangement in P								A 163	140
b	ii res, explain the arrangement iirr	art XI V and Comp	piete trie ion	ownig	iable.		Δ	mount		
С	Beginning balance					1c		inount	22	2,067.
d	Additions during the year					1d				7,518.
e	Distributions during the year					1e				3,572.
f	Ending balance					1f				,013.
2a	Did the organization include an amou								Yes	X No
	If "Yes," explain the arrangement in P									
Par			tion answe	ered "	Yes" to For	rm 9	90. Part IV. line	10.		
		(a) Current Year	(b) Prior y		(c) Two year				(e) Four ye	ears back
1a	Beginning of year balance	406,603.	439	,934.						
b	Contributions	445.		711.						
С	Net investment earnings, gains,									
	and losses	54,785.	-76	,042.						
d	Grants or scholarships									
е	Other expenditures for facilities .									
	and programs	100.								
f	Administrative expenses									
g	End of year balance	461,933.		,603.						
2	Provide the estimated percentage of the	•		s:						
а	Board designated or quasi-endowment		00_%							
b	Permanent endowment ► 90.36									
	Term endowment ▶ 9.6400 %									
зa	Are there endowment funds not in the	e pos session of	tne organiza	ation th	at are held a	and a	administered for th	ie		
	organization by:								-	es No
	(i) unrelated organizations								3a(i)	X
h	(ii) related organizations  If "Yes" to 3a(ii), are the related organ								3a(ii) 3b	X
_	-		-						30	
4 Par	Describe in Part XIV the intended use					+ 🗸	lino 10			
Par			-							
	Description of investment		or other basis estment)	(b	) Cost or other basis (other)		(c) Accumulated depreciation	(d	) Book value	9
	Land	`	7		(/		,			
b	Buildings					-				
C	Leasehold improvements					+				
d	Equipment				119,61	3	91,056		28	3,557.
e	Other				,		31,000		20	,
	I. Add lines 1a through 1e. (Column (		m 990, Part	X, col	umn (B), line	e 10(	c).) <b>&gt;</b>		28	3,557.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 23-6390716 Page **3** 

Part VII	Investments - Other Securities. See Fe	orm 990, Part X, lin	e 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
Financial d	erivatives			
Closely-hel	d equity interests			
	n (b) must equal Form 990, Part X, col. (B) line 12.)	000 D(1// I'-	10	
Part VIII	-			
	(a) Description of investment type	(b) Book value	(c) Method of valuatior Cost or end-of-year market	n: : value 
Total (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, li	ne 15.		
		Description		(b) Book value
LUCE CE	NTER FIXED ASSETS	·		1,573,800.
LUCE CE	NTER ENDOWMENT FUND			417,383
				1,991,183.
Part X	Other Liabilities. See Form 990, Part X	, line 25.		
1.	(a) Description of liability	(b) Amount		
Federal inc	come taxes			
			_	
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.)			

**2.** FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Schedule D (Form 990) 2009 23-6390716

Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financia		onte	Page <b>4</b>
1 ai t	T 1 1 (5 000 D 1) (1) (1) (1) (1)		1	2,494,558.
2	T 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		2	2,365,716.
			3	128,842.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		4	166,112.
4	Net unrealized gains (losses) on investments			100,112.
5	Donated services and use of facilities		5	
6	Investment expenses	<b>I</b>	6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	1.00 110
9	Total adjustments (net). Add lines 4 through 8		9	166,112.
10			10	294,954.
Part	•	e per Rett		2,769,512.
1	Total revenue, gains, and other support per audited financial statements		•	<u>1</u> 2,769,512.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	166 116	,	
a	Net unrealized gains on investments  2a	166 <b>,</b> 112	_	
b	Donated services and use of facilities 2b	65.	3.	
С.	Recoveries of prior year grants 2c	100 100	$\dashv$	
d	Other (Describe in Part XIV.)	108,189		074 054
е	Add lines 2a through 2d		. –	274,954.
3	Subtract line 2e from line 1		• 📙	<b>3</b> 2,494,558.
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		_	
b	Other (Describe in Part XIV.)			
С	Add lines 4a and 4b		. –	lc
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			<b>5</b> 2,494,558.
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expens	ses per R	etur	
1	Total expenses and losses per audited financial statements			1 2,474,558.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities 2a	65	3.	
b	Prior year adjustments 2b		_	
С	Other losses 2c		_	
d	Other (Describe in Part XIV.)	108,189	9.	
е	Add lines 2a through 2d		. 2	le 108,842.
3	Subtract line 2e from line 1		. L	2,365,716.
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			
b	Other (Describe in Part XIV.)			
С	Add lines 4a and 4b			4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u> </u>		<b>5</b> 2,365,716.
Part	XIV Supplemental Information			<u> </u>
and 2b	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and port V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and art to provide any additional information.	d 4b. Also	comp	olete
SEE	PAGE 5			

Schedule D (Form 990) 2009 23-6390716 Page **5** 

### Part XIV Supplemental Information (continued)

SCHEDULE D, PART V, QUESTION 4

ENDOWMENT IS HELD FOR CAPITAL IMPROVEMENTS TO THE LUCE CENTER BUILDING WHICH IS JOINTLY OWNED WITH AMERICAN ACADEMY OF RELIGION. ONLY THE PORTION ATTRIBUTABLE TO SBL IS INCLUDED HERE AND IN SBL FINANCIAL STATEMENTS.

---

SECOND ENDOWMENT IS HELD FOR ESTABLISHMENT OF SCHOLARSHIPS FOR THE ADVANCEMENT OF BIBLICAL SCHOLARSHIP.

SCHEDULE D, PART XII, QUESTION 2D

\$57,006 IS THE RENTAL DEPRECIATION EXPENSE RECOGNIZED ON PART VIII OF FORM 990.

\_\_\_

\$51,183 IS THE COST OF GOODS SOLD RECOGNIZED ON PART VIII OF FORM 990.

SCHEDULE D, PART XIII, QUESTION 2D

\$57,006 IS THE RENTAL DEPRECIATION EXPENSE RECOGNIZED ON PART VIII OF FORM 990.

---

\$51,183 IS THE COST OF GOODS SOLD RECOGNIZED ON PART VIII OF FORM 990.

Schedule D (Form 990) 2009 23-6390716 Page **5** 

Part XIV Supplemental Information (continued)

SCHEDULE D, PART IV, QUESTION 1B

SBL SELLS PUBLICATIONS FOR BROWN JUDAIC STUDIES, WILLIAM CAREY UNIVERSITY INTERNATIONAL PRESS, SHEFFIELD PHOENIX AND INSTITUTE OF SACRED MUSIC AT YALE. FUNDS FROM THESE SALES, NET OF FEES, ARE REMITTED TO THESE ORGANIZATIONS ON VARYING SCHEDULES, USUALLY QUARTERLY OR ANNUALLY. IN ADDITION, SBL ACCOUNTS FOR FUNDS OF TWO REGIONAL GROUPS WHICH CONDUCT MEETINGS RELATED TO SBL'S MISSION. THE FUNDS OF THESE VARYING ORGANIZATIONS DO NOT BELONG TO SBL AND ARE THUS, NOT INCLUDED IN THE SBL FINANCIAL STATEMENTS.

FIN 48 FOOTNOTE

UNDER THE INTERNAL REVENUE CODE SECTION 501(C)(3), THE SOCIETY IS EXEMPT FROM INCOME TAXES. ACCORDINGLY, NO PROVISION FOR FEDERAL AND STATE INCOME TAXES IS REQUIRED.

\_\_\_

THE SOCIETY ANNUALLY EVALUATES ALL FEDERAL AND STATE INCOME TAX

POSITIONS. THIS PROCESS INCLUDES AN ANALYSIS OF WHETHER THESE INCOME TAX

POSITIONS THE SOCIETY TAKES MEET THE DEFINITION OF AN UNCERTAIN TAX

POSITION UNDER THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING

STANDARDS CODIFICATION.

Schedule D (Form 990) 2009

### Schedule F (Form 990)

### **Statement of Activities Outside the United States**

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

		ETY OF BIB	LICAL LITE	ERATURE	23-63	390716
Pai	rt I General Informa "Yes" to Form 99	ation on Activ 90, Part IV, lir	vities Outside ne 14b.	e the United States. Co	omplete if the organizat	ion answered
1	For grantmakers. Does assistance, the grantees' the grants or assistance?	the organization	on maintain re the grants or a	assistance, and the selec	_	
2	For grantmakers. Describe United States.	oe in Part IV th	e organization'	s procedures for monitor	ing the use of grant fund	s outside the
3	Activities per Region. (Use	Schedule F-1	(Form 990) if a	dditional space is needed.	)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
EURC	PE	0	0	PROGRAM SERVICES	CONFERENCE	12,447.
EAST	ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	CONFERENCE	19,672.
Tota	nls	0	_			32 119

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

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009 23-6390716 Page **2** 

					appraisal other)
	ranizations listed above that are recognized as charities by the foreign	panizations listed above that are recognized as charities by the foreign country, recognized	ranizations listed above that are recognized as charities by the foreign country, recognized as tax-ever	panizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	Janizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

JSA 9E1275 1.000 Schedule F (Form 990) 2009 23-6390716 Page **3** 

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. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009 23-6390716 Page **4** 

Part IV	Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.
SCHEDUL	E F, PART I, QUESTION 2
GRANTS	PROVIDED TO BRING MEMBERS OUTSIDE THE US TO SBL'S MEETINGS ARE
MONITOR	ED FOR PROPER USE OF FUNDS BY NOT PROVIDING THE FUNDS UNTIL AN
INDIVID	UAL ATTENDS THE MEETING OR BY PURCHASING A TICKET ON THEIR BEHALF
TO COME	TO THE MEETING.

### **SCHEDULE J** (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

Attach to Form 990. See separate instructions. OMB No. 1545-0047 **Open to Public** Inspection

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

Department of the Treasury

Internal Revenue Service

Employer identification number 23-6390716

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	1b	X	
2	explain			
_	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		X
	1.1.1.1	_		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2009

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown	of W-2 and/or 1099-MISC	compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
	(i)	86,952.	0.	0.	12,054.	51,603.	150,609.	0.
KENT HAROLD RICHARDS	(ii)	0.	0.	0.			0.	
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)			<del> </del>				
	(ii)							
	(i)			<del> </del>				
	(ii)							

Part III Supplemental Information								
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.								
SCHEDULE J, PART I, QUESTION 1A								
MR. RICHARDS RECEIVES A HOUSING ALLOWANCE IN THE AMOUNT OF \$42,420.								

# SCHEDULE O (Form 990)

### **Supplemental Information to Form 990**

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

▶ Attach to Form 990.

OMB No. 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

Employer identification number 23-6390716

23 0330710

ATTACHMENT 2

FORM 990, PART III, QUESTION 4D

OTHER PROGRAMS INCLUDE MEMBERSHIP, REGIONS, AND RESEARCH AND TECHNOLOGY.

\_\_\_

MEMBERSHIP AND REGIONS - AS OF NOVEMBER 2010 THERE WERE 8,703 MEMBERS OF THE SOCIETY. THE MEMBERSHIP FEE PROVIDES A MYRIAD OF MEMBER SERVICES.

MEMBERS RECEIVE DISCOUNTS ON JOURNALS, MEETING REGISTRATIONS, AND BOOKS.

MEMBERS PARTICIPATE IN THE GOVERNANCE AND PROVIDE DIRECTION THROUGH THEIR WORK ON COMMITTEES. OVER 3,229 MEMBERS PARTICIPATE AS CHAIRS,

PRESENTERS, PRESIDERS, OR PANELISTS AT THE ELEVEN REGIONAL MEETINGS, THE INTERNATIONAL MEETING, AND THE ANNUAL MEETING; OVER 5,700 MEMBERS ATTEND THOSE MEETINGS. THE SOCIETY OF BIBLICAL LITERATURE IS MADE UP OF A COMMUNITY OF MEMBER SCHOLARS VOLUNTEERING THEIR TIME AND TALENTS TO FURTHER BIBLICAL SCHOLARSHIP FOR MANY YEARS TO COME AND TO PASS ALONG THEIR KNOWLEDGE TO THOSE WHO WILL FOLLOW IN THEIR FOOTSTEPS.

---

TECHNOLOGY - TECHNOLOGY WAITS FOR NO MAN. TRYING TO STAY ABREAST OF THE LATEST TECHNOLOGY AND WHAT IT MEANS FOR THE SOCIETY IS A DAUNTING TASK AND HAS BECOME A CHALLENGE THAT IS DEFEATING MANY AN ORGANIZATION. THE SOCIETY OF BIBLICAL LITERATURE HAS EMBRACED TECHNOLOGY AND TO DATE HAS PROVIDED EXCELLENT MEMBER SERVICES BY STAYING ABREAST OF NEW TECHNOLOGY. THE PUBLICATIONS PROGRAM QUICKLY MOVED TO PRINT-ON-DEMAND TO REDUCE COST OF BOOK PUBLICATIONS AND INVENTORY STORAGE, ENABLING THE PRODUCTION OF MORE BOOKS IN A GIVEN YEAR. THE WEBSITE HAS HAD ONE MAJOR OVERHAUL AND IS DUE TO HAVE ANOTHER IN THE NEAR FUTURE. CONGRESSES DEPARTMENT HAS

Schedule O (Form 990) 2009 Page 2

Name of the organization SOCIETY OF BIBLICAL LITERATURE

Employer identification number

23-6390716

ATTACHMENT 2 (CONT'D)

WORKED WITH THE TECHNOLOGY DEPARTMENT TO CONTINUALLY CREATE BETTER

ENVIRONMENTS FOR PROGRAM UNIT CHAIRS TO UTILIZE AND FOR MEMBER

REGISTRATION AND ONLINE SERVICES. AN ORGANIZATION MUST EITHER OUTSOURCE

OR HAVE A TECHNOLOGY DEPARTMENT. THE SOCIETY HAS THEIR OWN TECHNOLOGY

DEPARTMENT.

FORM 990, PART VI, SECTION B, QUESTION 11

THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND FINANCE COMMITTEE PRIOR TO FILING TO ENSURE THAT NO OBVIOUS MISTAKES OR MISSTATEMENTS

OCCUR. THE FORM 990 WILL BE PROVIDED TO THE BOARD BEFORE THE RETURN IS FILED BY ONE OF TWO METHODS. EITHER IT WILL BE UPLOADED TO A WEBSITE THAT ONLY THE BOARD HAS ACCESS TO OR THEY WILL BE SENT A PASSWORD PROTECTED ELECTRONIC COPY OF THE RETURN.

FORM 990, PART VI, SECTION B, QUESTION 12C

THE GOVERNING BODY IS REQUIRED TO COMPLETE A STATEMENT REGARDING CONFLICT OF INTERESTS ON AN ANNUAL BASIS. LISTS OF STATEMENTS SENT OUT ARE MAINTAINED AND CHECKED OFF AS THE STATEMENT IS RECEIVED. EACH STATEMENT IS REVIEWED FOR CONFLICTS.

FORM 990, PART VI, SECTION B, QUESTION 15A

SBL FOCUSES ON COMPARABLE NONPROFIT ORGANIZATIONS IN OUR AREA TO
BENCHMARK PAY. IN ADDITION, MARKET INFORMATION FROM TWO ADDITIONAL
MARKET SEGMENTS, PRIVATE FOUNDATIONS AND PUBLISHED NOT-FOR-PROFIT
COMPENSATION SURVEYS MAY BE USED AS A SUPPLEMENT. WE ALSO COLLECT OTHER
PUBLISHED SURVEY DATA, WHEN APPROPRIATE, FOR FOR-PROFIT ORGANIZATIONS FOR
SPECIFIC FUNCTIONAL COMPETENCIES. DATA FROM THESE MARKET SEGMENTS ARE

Schedule O (Form 990) 2009 Page 2

Name of the organization SOCIETY OF BIBLICAL LITERATURE

Employer identification number

23-6390716

ATTACHMENT 2 (CONT'D)

USED TO FORM A "MARKET COMPOSITE" TO ASSESS THE COMPETITIVENESS OF

COMPENSATION. EXECUTIVE DIRECTOR COMPENSATION POLICY IS ADMINISTERED BY

THE FINANCE/AUDIT/INVESTMENT COMMITTEE. IT IS RESPONSIBLE FOR

ESTABLISHING AND MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR THE

EXECUTIVE DIRECTOR OF THE ORGANIZATION. THE COMMITTEE MEETS AS NEEDED TO

REVIEW THE COMPENSATION PROGRAM AND MAKE RECOMMENDATIONS FOR ANY CHANGES

TO COUNCIL AS APPROPRIATE. THE COMMITTEE REVIEWS AND APPROVES BASE

SALARIES AND ANNUAL INCENTIVE OPPORTUNITY ADJUSTMENTS, AND OBJECTIVES AND

GOALS FOR THE UPCOMING YEAR'S ANNUAL INCENTIVE PLAN.

FORM 990, PART VI, SECTION C, QUESTION 19

THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY

ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FINANCIAL STATEMENTS ARE

PUBLISHED ANNUALLY ON THE SBL WEBSITE, GUIDESTAR, AND ARE ALSO AVAILABLE

FORM 990, PART VI, SECTION A, QUESTIONS 7A

MEMBERS JOIN THE SOCIETY THROUGH THE PURCHASE OF A MEMBERSHIP. EACH YEAR

AT THE ANNUAL MEETING THERE IS A BUSINESS MEETING AT WHICH THE MEMBERS

HEAR A MOTION TO APPROVE THE NEW MEMBERS TO COUNCIL. THE GOVERNING BODY

OF THE ORGANIZATION IS THEN GIVEN THE RESPONSIBILITY TO MAKE DECISIONS ON

ATTACHMENT 3

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE OBJECT OF THE SOCIETY SHALL BE TO STIMULATE THE CRITICAL

Schedule O (Form 990) 2009

UPON REQUEST.

BEHALF OF THE ORGANIZATION.

Schedule O (Form 990) 2009 Page 2

Name of the organization SOCIETY OF BIBLICAL LITERATURE

Employer identification number 23-6390716

ATTACHMENT 3 (CONT'D)

### FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

INVESTIGATION OF THE CLASSICAL BIBLICAL LITERATURES, TOGETHER WITH OTHER RELATED LITERATURES, BY EXCHANGE OF SCHOLARLY RESEARCH BOTH IN PUBLISHED FORM AND IN PUBLIC FORM. THE SOCIETY OF BIBLICAL LITERATURE IS THE OLDEST AND LARGEST INTERNATIONAL SCHOLARLY MEMBERSHIP ORGANIZATION IN THE FIELD OF BIBLICAL STUDIES. FOUNDED IN 1880, THE SOCIETY HAS GROWN TO OVER 8,700 INTERNATIONAL MEMBERS INCLUDING TEACHERS, STUDENTS, RELIGIOUS LEADERS AND INDIVIDUALS FROM ALL WALKS OF LIFE WHO SHARE A MUTUAL INTEREST IN THE CRITICAL INVESTIGATION OF THE BIBLE.

\_\_\_

THE SOCIETY'S MISSION TO FOSTER BIBLICAL SCHOLARSHIP IS A SIMPLE,

COMPREHENSIVE STATEMENT THAT ENCOMPASSES THE SOCIETY'S ASPIRATIONS.

OUR VISION IS TO OFFER MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT,

INTELLECTUAL GROWTH, AND PROFESSIONAL DEVELOPMENT.

\_\_\_

THE FOLLOWING MISSION STATEMENT AND STRATEGIC VISION STATEMENTS WERE ADOPTED BY THE SBL COUNCIL MAY 16, 2004.

\_\_\_

MISSION STATEMENT:

FOSTER BIBLICAL SCHOLARSHIP

\_\_\_

STRATEGIC VISION STATEMENTS:

- -ADVANCE THE ACADEMIC STUDY OF BIBLICAL LITERATURE AND ITS CULTURAL CONTEXTS
- -COLLABORATE WITH EDUCATIONAL INSTITUTIONS AND OTHER APPROPRIATE ORGANIZATIONS TO SUPPORT BIBLICAL SCHOLARSHIP AND TEACHING

Schedule O (Form 990) 2009

Schedule O (Form 990) 2009 Page 2

Name of the organization Employer identification number SOCIETY OF BIBLICAL LITERATURE 23-6390716

ATTACHMENT 3 (CONT'D)

### FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

- -DEVELOP RESOURCES FOR DIVERSE AUDIENCES, INCLUDING STUDENTS, RELIGIOUS COMMUNITIES AND THE GENERAL PUBLIC
- -FACILITATE BROAD AND OPEN DISCUSSION FROM A VARIETY OF PERSPECTIVES
- -OFFER MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT, INTELLECTUAL GROWTH,
- AND PROFESSIONAL DEVELOPMENT AS TEACHERS AND SCHOLARS
- -ORGANIZE CONGRESSES FOR SCHOLARLY EXCHANGE
- -PUBLISH BIBLICAL SCHOLARSHIP

FORM 990, PART III, LINE 4D - OTHER	PROGRAM SERVICES	ATTACH	MENT 4
DESCRIPTION	GRANTS	EXPENSES	REVENUE
MEMBERSHIP	0.	154,752.	441,720.
RESEARCH AND TECHNOLOGY	0.	97,853.	0.
REGIONS	0.	93,301.	0.
TOTALS	0.	345,906.	441,720.

FORM 990, PART VIII - INVESTMENT I	NCOME		ATTACHMENT 5	
DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INTEREST INCOME	13,116.			13,116.
DIVIDEND INCOME	11,682.			11,682.
TOTALS	24,798.			24,798.

Schedule O (Form 990) 2009 Page 2 Name of the organization Employer identification number SOCIETY OF BIBLICAL LITERATURE 23-6390716 ATTACHMENT 6 FORM 990, PART VIII - INCOME FROM INVESTMENT OF TE BOND PROCEEDS (A) (B) (C) (D) TOTAL RELATED OR UNRELATED EXCLUDED DESCRIPTION REVENUE EXEMPT REVENUE BUSINESS REV. REVENUE 219. US TREASURY BOND INCOME 219. TOTALS 219. 219. ATTACHMENT 7 FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES ENDING DESCRIPTION BOOK VALUE 28,203. PREPAID EXPENSES 28,203. TOTALS ATTACHMENT 8 FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES ENDING COST DESCRIPTION BOOK VALUE OR FMV CORPORATE STOCKS 301,550. FMV 502,345. US GOVERNMENT OBLIGATIONS FMV 803,895. TOTALS

ATTACHMENT

Schedule O (Form 990) 2009 Page 2

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

23-6390716

ATTACHMENT 9 (CONT'D)

FORM 990, PART X - DEFERRED REVENUE

DESCRIPTION ENDING
BOOK VALUE

DEFERRED REVENUE 1,070,381.

TOTALS \_\_\_\_\_\_1,070,381.

## **RENT AND ROYALTY INCOME**

Taxpayer's Name							1	-	ing Number
SOCIETY OF BIBLI	ICAL LITERA	TURE					2	<u>3-63</u>	90716
DESCRIPTION OF PROPERTY									
RENTAL BUILDING									
	ctively participate in th	e operation of							
REAL RENTAL INCO	)ME		-			• • •		_	
OTHER INCOME						104	1 2 5		
RENTAL BUILDING						104	,135	-	
TOTAL GROSS INCOME								$\dashv$	104,135.
OTHER EXPENSES:			<u></u>					-	104,133.
SEE ATTACHMENT									
SEE ATTACHMENT								$\dashv$	
DEPRECIATION (SHOWN BELOW	V)				57,0	06.			
LESS: Beneficiary's Portion								_	
AMORTIZATION									
LESS: Beneficiary's Portion								_	
DEPLETION									
LESS: Beneficiary's Portion								$\dashv$	157 511
TOTAL EXPENSES TOTAL RENT OR ROYALTY INCO	ME (1 099)							-	<u>157,511.</u> -53,376.
Less Amount to	JWL (LOSS)							- 1	55,570.
Rent or Royalty									
Depreciation									
Depletion								_	
Investment Interest Expense								_	
Other Expenses								_	
Net Income (Loss) to Others									
Net Rent or Royalty Income (Loss									-53 <b>,</b> 376.
Deductible Rental Loss (if Applic	able)								
SCHEDULE FOR DEPREC	CIATION CLAIME	D				ı			
(a) Description of according	(b) Cost or	(c) Date	(d) ACRS	(e) Bus.	(f) Basis for	(g) Depreciation in	(h)	(i) Life or	(j) Depreciation
(a) Description of property	unadjusted basis	acquired	des.	%	depreciation	prior years	Method	rate	for this year
CEE AMENIA									
SEE ATTACHMENT									
T-4-l-									
JSA <b>Totals</b>									

100,505.

### SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

### OTHER INCOME

RENTAL BUILDING	104,135. 104,135.
OTHER DEDUCTIONS	
CLEANING	88,855.
LEGAL AND OTHER PROFESSIONAL FEES	765.
WAGES	7,862.
MISCELLANEOUS	3,023.

### RENT AND ROYALTY SUMMARY

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET <u>INCOME</u>
RENTAL BUILDING	104,135.	57,006.	100,505.	-53,376.
TOTALS	104,135.	<u> </u>	100,505.	-53,376.

SOCIETY OF BIBLICAL LITERATURE 23-6390716

FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD

ATTACHMENT 10

						MINUS:	
		BEGINNING		SALARIES		ENDING	COST OF
DESCRIPTION	GROSS SALES	INVENTORY	PURCHASES	AND WAGES	OTHER COSTS	INVENTORY	GOODS SOLD
BOOK SALES	421,713.	40,265.			51,272.	40,354.	51,183.
TOTALS	421,713.	40,265.			51,272.	40,354.	51,183.

ATTACHMENT 10

61106

# Form **4797**

# Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Department of the Treasury Internal Revenue Service (9

► Attach to your tax return.

► See separate instructions.

OMB No. 1545-0184

2009

Attachment Sequence No. 27

Identifying number Name(s) shown on return SOCIETY OF BIBLICAL LITERATURE 23-6390716 Enter the gross proceeds from sales or exchanges reported to you for 2009 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (loss) 2 (b) Date acquired allowed or basis, plus Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) sales price allowable since improvements and sum of (d) and (e) acquisition expense of sale -7,338. ATTACHMENT 11 3 Gain, if any, from Form 4684, line 43 3 4 Section 1231 gain from installment sales from Form 6252, line 26 or 37 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 6 Gain, if any, from line 32, from other than casualty or theft 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: -7,338. Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. Nonrecaptured net section 1231 losses from prior years (see instructions) Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions) Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7 7,338. Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 Net gain or (loss) from Form 4684, lines 35 and 42a 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 Combine lines 10 through 16 -7,338. 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below: a If the loss on line 11 includes a loss from Form 4684, line 39, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." 18a See instructions b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040,

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2009)

23-6390716 Form 4797 (2009) Page 2

P	Gain From Disposition of Property (see instructions)	' Un	der Sections 124	5, 1250, 1252, 1	1254	1, and 1255	. 5
19	(a) Description of section 1245, 1250, 1252, 1254, or 12	255 p	roperty:			(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
_	<u> </u>					(, day, j)	(, day, y)
É							
_							
_	,						
_	These columns relate to the properties on lines 19A through 19D.		Property A	Property B		Property C	Property D
20		20					
21		21					
22	·	22					
23	Adjusted basis. Subtract line 22 from line 21	23					
24	Total gain. Subtract line 23 from line 20	24					
25	If section 1245 property:						
	a Depreciation allowed or allowable from line 22	25a					
	<b>b</b> Enter the <b>smaller</b> of line 24 or 25a	25b					
26							
	a Additional depreciation after 1975 (see instructions)	26a					
	<b>b</b> Applicable percentage multiplied by the <b>smaller</b> of						
	line 24 or line 26a (see instructions)	26b					
	c Subtract line 26a from line 24. If residential rental property						
	or line 24 is not more than line 26a, skip lines 26d and 26e	26c					
	<b>d</b> Additional depreciation after 1969 and before 1976	26d					
	e Enter the smaller of line 26c or 26d	26e					
	f Section 291 amount (corporations only)	26f					
		26g					
27	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).	-					
	a Soil, water, and land clearing expenses	27a					
	<b>b</b> Line 27a multiplied by applicable percentage (see instructions)	27b					
	c Enter the smaller of line 24 or 27b	27c					
28	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining	28a					
	<b>b</b> Enter the <b>smaller</b> of line 24 or 28a	28b					
29	,						
	a Applicable percentage of payments excluded from						
	income under section 126 (see instructions)	29a					
_	, , ,	29b					
Sι	ummary of Part III Gains. Complete property	col	umns A through D	through line 29	9b b	efore going to lin	e 30.
30	Total gains for all properties. Add property columns A th	roug	h D, line 24				
31	Add property columns A through D, lines 25b, 26g, 27c,	28b,	and 29b. Enter here a	nd on line 13		31	
32	Subtract line 31 from line 30. Enter the portion from case	ualty	or theft on Form 4684,	line 37. Enter the p	ortic	n from	
	other than casualty or theft on Form 4797, line 6						
P	art IV Recapture Amounts Under Section (see instructions)						6 or Less
						(a) Section	(b) Section
						179	280F(b)(2)
33	Section 179 expense deduction or depreciation allowable	le in	orior years	[	33		
34	Recomputed depreciation (see instructions)				34		
35		e ins	tructions for where to r	eport	35		
_							Form 4797 (2000)

Form **4797** (2009)

COMPUTERS VAR 06/30/2010 0. 10,383. 10,8975	Description	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed	Cost or Other Basis	Gain or (Loss)
AIR CONDITIONER FLUE 02/01/2009 06/30/2010 0. 352. 7,1766,8:	COMDITED C	777 D	06/30/2010		1 0 3 2 3	10 807	_ 51 /
	AIR CONDITIONER FLUE	02/01/2009	06/30/2010	0.	352.	7,176.	-6 <b>,</b> 824.
Totals -7,33							-7 <b>,</b> 338.

orm	990-T	Exemp	ot Organization E	Business Ir	ncom	e Tax Return	and proxy	y tax under section	n 6033(e))	OMB No. 1	545-0687
	nent of the Treasury		For calendar year 2009					7 / 01 , 2009, an		20	U9
	Revenue Service			6/30,20 1				instructions.		Open to Publ for 501(c)(3) Org	ic Inspection janizations Only
<u>,</u> [	Check box if		Name of organization (	Check bo	x if nam	ne changed and see	instruction	ns.)		oyer identificat	ion number
	address changed								on page	yees' trust, see instructi e 9.)	ONS FOR BIOCK D
<b>B</b> Exer	npt under section	l	SOCIETY OF 1	BIBLICAL	LIT	ERATURE					
X	501(C)(3)	Print   or	Number, street, and roo	m or suite no. If	a P.O.	box, see page 8 of i	nstructions	S.		390716	
<u> </u>	408(e) 220(e)	Туре								lated business and an articles and a structions for Block	-
Ш.	408A530(a)	**	825 HOUSTON		AD N	E		350	(366)	istructions for block	( L on page 9.)
	529(a)		City or town, state, and								
	value of all assets		ATLANTA, GA								
	•		up exemption number				9.) ▶				
	3,989,123.	<b>G</b> Che	ck organization type	▶ X 501	(c) cor	poration	501(	(c) trust	401(a)	trust	Other trus
			mary unrelated busine								
			orporation a subsidiary				sidiary co	ntrolled group?		▶ 📖 '	Yes X
			entifying number of the	e parent corpo	oration.	. •					
			SUSAN MADARA				Telepho	ne number 🕨	404-72	7-3103	
Part	Unrelate	d Trade	or Business Inc	ome		(A) Incor	ne	(B) Exp	enses	(C)	) Net
1 a	Gross receipts or	sales		4							
b	Less returns and allowa	nces		<b>c</b> Balance	1c						
2	Cost of goods sold	d (Schedu	ıle A, line 7)		2						
3	Gross profit. Subtr	ract line 2	from line 1c		3						
4 a	Capital gain net in	come (att	ach Schedule D)		4a						
b	Net gain (loss) (Form	n 4797, Par	rt II, line 17) (attach Form	4797)	4b						
С	Capital loss deduc	ction for tr	usts		4c						
			and S corporations (atta		5						
6	Rent income (Sch	edule C)			6						
			come (Schedule E)		7						
			ies, and rents fron								
	organizations (Sch	nedule F)			8						
			section 501(c)(7),								
					9						
			come (Schedule I)		10						
			ıle J)		11						
			of the instructions; attach		12						
	,		ugh 12								
Part			Taken Elsewher			of the instruc	tions fo	r limitations	on deduc	tions.)	
		or contr	ibutions, deduction	ons must b	, e dire	ctly connecte	d with t	he unrelated	busines	s income.)	
14			irectors, and trustees								
			ee page 13 of the instr								
			1562)			•			0.		
			on Schedule A and els						22b		
			on concade / and cio			·					
			ompensation plans								
			Schedule I)								
			chedule J)								
			chedule)								
	Total deductions.					n Cubtract line 2					
			income before net op	_							
			n (limited to the amou	•							(
32			income before specifi				-		32		
		((Lanara			ne for a	exceptions )			33		
33			lly \$1,000, but see line								
33			lly \$1,000, but see line e income. Subtract line o or line 32 uction Act Notice, see in								(

Part	III T	Tax Computation					
35	Organizat	tions Taxable as Corporations. See instructions for tax computation on page	e 15.				
	Controlled	d group members (sections 1561 and 1563) check here   See instructions and:					
а	, ,	ur share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that ord	er):				
	(1) \$	(2) \$ (3) \$					
b	Enter orga	anization's share of: (1) Additional 5% tax (not more than \$11,750)		.			
	(2) Addition	onal 3% tax (not more than \$100,000)					
		x on the amount on line 34		35c			0.
36		<b>Faxable at Trust Rates.</b> See instructions for tax computation on page 16. Income					
		nt on line 34 from: Tax rate schedule or Schedule D (Form 1041)		36			
37		x. See page 16 of the instructions		37			
38		e minimum tax		38			0.
39 Pari		d lines 37 and 38 to line 35c or 36, whichever applies		39			
	•	ax credit (corporations attach Form 1118; trusts attach Form 1116) 40a dits (see page 16 of the instructions) 40b		-			
				-			
		prior year minimum tax (attach Form 8801 or 8827)  40c  40c  40d		-			
				400			
41		dits. Add lines 40a through 40d ine 40e from line 39		40e 41			0.
42		s. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach sch		42			
43		Add lines 41 and 42	=	43			0.
		s: A 2008 overpayment credited to 2009		43			
		mated tax payments 44b					
c		sited with Form 8868					
	•	rganizations: Tax paid or withheld at source (see instructions)  44d					
	_	ithholding (see instructions)					
		dits and payments: Form 2439					
		m 4136 Other Total ▶ 44f					
45	Total payı	ments. Add lines 44a through 44f		45			
46	Estimated	I tax penalty (see page 4 of the instructions). Check if Form 2220 is attached		46			
47		If line 45 is less than the total of lines 43 and 46, enter amount owed	▶	47			0.
48	Overpaym	nent. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	▶	48			0.
49		amount of line 48 you want: Credited to 2010 estimated tax Refun		49			0.
Part	V S	Statements Regarding Certain Activities and Other Information (see inst	ructions	on pa	age 17)		
1		ne during the 2009 calendar year, did the organization have an interest in or a signature or other				Yes	No
		bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90	)-22.1, I	Report	of Foreign		
		Financial Accounts. If YES, enter the name of the foreign country here					Х
2		e tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to	, a forei	gn trus	t?		X
		e page 5 of the instructions for other forms the organization may have to file.					
3		amount of tax-exempt interest received or accrued during the tax year					
		A - Cost of Goods Sold. Enter method of inventory valuation					
1	•	at beginning of year 1 6 Inventory at end of year		6			
2		s					
3				_			
4 a		l section 263A costs Part I, line 2 Part II, line 2 Part I, line 2		7 ro	spect to	Yes	No
b		ts (attach schedule)  4a  B Do the rules of section 26: property produced or acquire	,			162	NO
5		d lines 1 through 4b 5 to the organization?					X
<u> </u>		penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to	the best of	of my kn	owledge and b	elief, it	
Sigr	correct a	and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	_				
Here					RS discuss this er sh <u>own</u> belo		
		ure of officer Date Title		struction			No
_		Preparer's Date Chack if		Prepa	arer's SSN or I		
Paid		signature Check if self-employer	, [		P007468	04	
•	arer's	Firm's name (or SMITH & HOWARD, P.C. FIN		12504			
use	Only	yours if self-employed), address, and ZIP code 171 17TH STREET, SUITE 900 Phone no.	404-8				
		ATLANTA, GA 30363			Form 9	90-T	(2009)

23-6390716 Form 990-T (2009) Page 3

Schedule C - Rent Income (see instructions on page 18		perty a	nd Personal Prop	erty	Leased \	Vith Real Prop	perty	<b>y</b> )	
Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent received	or accrue	ed						
(a) From personal property (if the per for personal property is more than more than 50%)	ercentage of rent n 10% but not	percenta	rom real and personal prop age of rent for personal prop if the rent is based on profi	erty e	xceeds				ected with the income (attach schedule)
(1)									
(2)									
(3)									
(4)									
Total	To	otal							
(c) Total income. Add totals of cohere and on page 1, Part I, line 6,	. , . , ,					(b) Total deduce Enter here and co Part I, line 6, col	on pag	ge 1,	
Schedule E - Unrelated De			ee instructions on pag	e 19	)				
1. Description of deb	t-financed property	,	2. Gross income from allocable to debt-finance			ductions directly conn debt-finance		perty	
·		property		(a) Straigh (attac	(a) Straight line depreciation (attach schedule)			Other deductions attach schedule)	
<u>(1)</u>							+		
(2)									
(3)									
(4)				_			+		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted of or allocable to debt-financed prope (attach schedule	erty	6. Column 4 divided by column 5			come reportable 2 x column 6)	(	(column	locable deductions n 6 x total of columns 3(a) and 3(b))
<u>(1)</u>				%					
(2)				%					
(3)				%					
(4)				%					
Totals  Total dividends-received deducti				<b>▶</b>	Part I, line	and on page 1, 7, column (A).			ere and on page 1, ine 7, column (B).
Schedule F - Interest, Ann			Ponte From Contro	مالد	l Organiz	ations	uctio	nc on	nago 20)
Schedule F - Interest, Am	Tuities, Royalties		kempt Controlled Org			ations(see insti-	uctio	115 011	page 20)
Name of controlled organization	2. Employer identification number		3. Net unrelated income (loss) (see instructions)	<b>4.</b> To	otal of specifie yments made	5. Part of colum included in the corganization's gro	control	ling	6. Deductions directly connected with income in column 5
(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Organiz	zations								
7. Taxable Income	8. Net unrelated inc (loss) (see instructi		9. Total of specified payments made	d	includ	art of column 9 that is led in the controlling zation's gross income			. Deductions directly nected with income in column 10
(1)					3.3	<u> </u>			
(2)									
(3)			1						
(4)									
Totals					Enter he	mns 5 and 10. re and on page 1, e 8, column (A).		Enter h	olumns 6 and 11. nere and on page 1, line 8, column (B).

Schedule G -Investment II	ncome of a Sec	tion 501(c)(	7), (9	), or (17) Organi	izatio	n (see inst	ructi	ons on pag	e 20)	-9-
1. Description of income	2. Amount of			3. Deductions directly connected (attach schedule)		4. Se (attach	t-asic	les	5. Total deduction and set-asides (co plus col. 4)	
<u>(1)</u>										
(2)										
(3)										
(4)										
	Enter here and Part I, line 9, co								Enter here and on pa Part I, line 9, column	
Totals										
Schedule I - Exploited Exe	mpt Activity Inc	come. Othe	r Tha	an Advertising Ir	ncom	ne (see instruc	ction	s on page	21)	
2. Gross unrelated     business income from trade or business		3. Expense directly connected w production unrelated business inco	es rith of	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5	<b>5.</b> (fror	Gross income n activity that not unrelated siness income		6. Expenses ttributable to column 5	7. Excess exer expenses (column 6 minu column 5, but n more than column 4).	us
				through 7.					00:0::::: 17:	
<u>(1)</u>										
(2)										
(3)										
(4)										
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here an page 1, Par line 10, col. (	t I,						Enter here an on page 1, Part II, line 26	
Schedule J - Advertising I	ncomo (soo instru	iotions on na	go 21	\						
	<u> </u>			<u> </u>						
Part I Income From Pe	riodicais Repor	ted on a Co	onso	lidated Basis			1			
1. Name of periodical	2. Gross advertising income	3. Direct advertising co		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5.	. Circulation income	6	i. Readership costs	7. Excess reade costs (column minus column 5, not more than column 4).	6 but
(1)										
(2)				-						
(3)				-					_	
				-					_	
(4)										
Totals (carry to Part II, line (5))	<u> </u>	41 0		-4- <b>D</b> i- / <b>F</b>		:	. 4	Lin David II	fill in a shown	
Part II Income From Pe			epar	ate Basis (For e	acn p	periodicai iis	stea	ın Part II	, fili in column	is Z
through 7 on a lin	ie-by-iirie basis.)			T						
1. Name of periodical	2. Gross advertising income	3. Direct advertising co		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5.	. Circulation income	6	i. Readership costs	7. Excess reade costs (column minus column 5, not more thar column 4).	6 but
(1)										
(1)	+									
(2)	+								+	
(3)										
(4)										
(5) Totals from Part I	Enter here and on page 1, Part I, line 11, col. (A).	Enter here an page 1, Pai line 11, col. (	rt I	_					Enter here ar on page 1, Part II, line 2	
Totals, Part II (lines 1-5)										
Schedule K - Compensation	on of Officers, D	Directors, a	nd T	rustees(see instru	ctions					
1. Name			2. Title					nsation attributable to elated business	<b>o</b>	
							%			
							%			
							%			
							%			
Total. Enter here and on page 1, P	art II, line 14						▶			

Form **990-T** (2009)

# INSTRUCTIONS FOR FILING SOCIETY OF BIBLICAL LITERATURE GA FORM 600T GEORGIA 600T - EXEMPT ORG. UNRELATED BUS. INC. TAX FOR THE PERIOD ENDED JUNE 30, 2010

\*\*\*\*\*\*\*

### SIGNATURE...

THE ORIGINAL RETURN SHOULD BE DATED AND SIGNED BY AN OFFICER OF THE ORGANIZATION IF APPLICABLE.

### FILING...

THE SIGNED RETURN SHOULD BE FILED ON OR BEFORE MAY 16, 2011 WITH...

GEORGIA DEPARTMENT OF REVENUE PROCESSING CENTER
P.O. BOX 740397
ATLANTA, GA 30374-0397



Mailing Address
Georgia Department of Revenue
Processing Center
P.O. Box 740397 Atlanta, Georgia 30374-0397

Georgia Form OUU-I (Rev. 1/10)
Exempt Organization
Unrelated Business Income Tax Return

Change of Address						
Exempt Organization		s Income Tax	Return		<b>20</b> 0 9	
(Under Georgia Code Section 4	<del>1</del> 8- <i>7-</i> 25)					
For the taxable year beginning	07/01	, 20 <u>0 9</u>	_ and ending _	06/30	, 20	<u>10</u>
Name of Organization				Federal Employer	ID No. (in case of em	nployees'
SOCIETY OF BIBLICAL	LITERATURE				ection 401 (a) and ex ert the trust's identific	
Number and Street				number.)	ert trie trasts identifie	ation
825 HOUSTON MILL ROA				23-6390		
City or Town, State and Zip Co	de			Date of current exe under which you ar	mption letter and IRS e exempt.	code section
ATLANTA, GA 30329	'ialai.a.m			-	·	, <del>-</del> , , ,
Name and Address of Trust's F	iduciary					(C)(3)
				3	CHEDULE 1	
1. Unrelated business taxable	income from Federal Form	n 990-T (attach cop	y)			0.
2. Additions						
3. Total (add line 1 and line 2)	)					0.
4. Subtractions						
Georgia unrelated business			ŕ			0.
COMPUTATION OF GEOR	· · · · · · · · · · · · · · · · · · ·			9	SCHEDULE 2	0.
COMPOTATION OF GLOR	OIA UNICELATED BUC	SINESS INCOME	184		BOTTLDOLL 2	
1. Line 5, above, multiplied by	6%		<b>&gt;</b>			0.
2. Less: Credits and Payment	s					
3. Withholding Credits (G2-A	and/or G-2RP)					
4. Balance of tax due OR ove	rpayment					0.
5. Interest due (see instruction	ns)		<b>&gt;</b>			
6. Penalties due (see instructi	ons)					
7. Balance of tax, interest and	penalties due with return					0.
8. If line 4 is an overpayment,	amount is to be credited of	on 20 <u>1 0</u>				
Estimated Tax ▶		Refunded ▶	0.			
A COPY OF THE FEDERAL 990 DECLARATION: I/We decla schedules and statements) a person other than a taxpaye  Signature of Officer	re, under penalty of pe and to the best of our k	rjury that I/we hav nowledge and be based on all info Si	ve examined this lief it is true, cor rmation of which MITH & HOWAR gnature of Individual	return (includ rect and comp n s/he has any D, P.C.	ing accompany lete. If prepare knowledge.	ying
Title	Data		00746804	Courity Number		
ritie	Date	Er	nployee ID or Social	Security Number		

-orm	990-T	Exemp	ot Organization E	Business Ir	ncom	e Tax Return	and proxy	tax under section	on 6033(e))	OMB No.	1545-0687
	ent of the Treasury		For calendar year 2009					$7 \underline{/}  0 \underline{1}$ , 2009, an		20	<i>)</i> U9
	Revenue Service			6/30, <b>20</b> 10				instructions.		Open to Pub for 501(c)(3) Or	olic Inspection ganizations Only
<u>, L</u>	Check box if		Name of organization (	Check bo	x if nan	ne changed and see	instruction	ns.)		loyer identifica	tion number
	address changed								on page	yees' trust, see instruc e 9.)	tions for Block D
3 Exer	npt under section		SOCIETY OF 1	BIBLICAL	LIT	ERATURE					
X	501(C)(3)	Print   or	Number, street, and roo	om or suite no. If	a P.O.	box, see page 8 of i	nstructions	3.		390716	
<u></u>	408(e) 220(e)	Type								lated business nstructions for Bloo	-
<u></u>	108A530(a)	**	825 HOUSTON		AD N	E		350	(366 11	istructions for bloc	,k L on page 9.)
_	529(a)		City or town, state, and								
	value of all assets of of year		ATLANTA, GA								
	•		up exemption number				9.) ▶				
	3,989,123.	<b>G</b> Che	eck organization type	▶ X 501	(c) cor	poration	501(	(c) trust	401(a)	trust	Other trus
			mary unrelated busine								
			orporation a subsidiary				sidiary co	ntrolled group?		▶ 📖	Yes X N
			lentifying number of the	e parent corpo	oration	<u>.                                     </u>					
			SUSAN MADARA				Telepho	ne number 🕨	404-72	7-3103	
Part	Unrelate	d Trade	or Business Inc	ome		(A) Incon	ne	(B) Exp	enses	(0	) Net
1 a	Gross receipts or	sales		_							
b	Less returns and allowa	nces		<b>c</b> Balance ▶	1c						
2	Cost of goods sold	d (Schedu	ıle A, line 7)		2						
3	Gross profit. Subtr	act line 2	from line 1c		3						
4 a	Capital gain net in	come (att	tach Schedule D)		4a						
b	Net gain (loss) (Form	n 4797, Par	rt II, line 17) (attach Form	4797)	4b						
С	Capital loss deduc	ction for tr	usts		4c						
5	Income (loss) from p	artnerships	s and S corporations (atta	ich statement)	5						
6	Rent income (Sch	edule C)			6						
			come (Schedule E)		7						
8	Interest, annuitie	s, royalt	ties, and rents fron	n controlled							
	organizations (Sch	nedule F)			8						
			section 501(c)(7),								
	organization (Sche	edule G)			9						
			come (Schedule I)		10						
			ule J)		11						
			of the instructions; attach		12						
13	Total. Combine lin	nes 3 thro	ugh 12	<u> </u>	13						
Part	Deduction	ns Not	Taken Elsewher	e (See pag	je 11	of the instruct	lions fo	r limitations	on deduc	tions.)	
	(Except f	or contr	ributions, deduction	ons must b	e dire	ctly connecte	d with t	he unrelated	busines	s income.)	
14	Compensation of	officers, d	lirectors, and trustees	(Schedule K)					14		
									I		
									I		
8									I		
			ee page 13 of the instr								
21	Depreciation (atta	ch Form 4	4562)				21		0.		
			on Schedule A and els						22b	,	
									23		
24			ompensation plans								
			· · · · · · · · · · · · · · · · · · ·								
			Schedule I)								
			chedule J)						I		
			chedule)						I		
	Total deductions.										
			income before net op								
			on (limited to the amou	-		in. Subtract line 2					
			income before specifi	•					32		(
			lly \$1,000, but see line				-				
									I	+	
7.4	onreialed busines	รร เสมสี <b>มิ</b> ไ			: 3/ 11	mie ss is greater	ulan iine				
34	32 enter the small	ler of zero	e income. Subtract lir o or line 32 uction Act Notice, see in	ic 55 iloili iiik		Ü			34		

Par	III T	Fax Computation					
35	Organizat	tions Taxable as Corporations. See instructions for tax computation on page	age 15.				
	Controlled	d group members (sections 1561 and 1563) check here See instructions and:					
а	Enter you	ur share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that o	rder):				
	(1) \$	(2) \$ (3) \$					
b	Enter orga	anization's share of: (1) Additional 5% tax (not more than \$11,750)		_			
		onal 3% tax (not more than \$100,000)		_			
С		ax on the amount on line 34		35c			0.
36	Trusts T	Taxable at Trust Rates. See instructions for tax computation on page 16. Income					
		nt on line 34 from: Tax rate schedule or Schedule D (Form 1041)		36			
37		c. See page 16 of the instructions		37			
38		e minimum tax		38			
39		d lines 37 and 38 to line 35c or 36, whichever applies		39			0.
		Fax and Payments					
40 a	Ū	ax credit (corporations attach Form 1118; trusts attach Form 1116)  40a		- 1			
D		dits (see page 16 of the instructions)  40b		-			
		pusiness credit. Attach Form 3800 40c prior year minimum tax (attach Form 8801 or 8827) 40d		-			
				10.			
e 41		dits. Add lines 40a through 40d line 40e from line 39		40e			0.
42		s. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach s		41			
			<del>-</del>	42			0.
43		. Add lines 41 and 42 s: A 2008 overpayment credited to 2009		43			
44 a				1			
				1			
q	•	sited with Form 8868  granizations: Tax paid or withheld at source (see instructions)  44d		1			
e	_	vithholding (see instructions)					
f		dits and payments: Form 2439					
•		rm 4136 Other Total ▶ 44f					
45		rments. Add lines 44a through 44f		45			
46		d tax penalty (see page 4 of the instructions). Check if Form 2220 is attached		46			
47		If line 45 is less than the total of lines 43 and 46, enter amount owed		47			0.
48		ment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	▶	48			0.
49	Enter the		unded 🕨	49			0.
Par	V S	Statements Regarding Certain Activities and Other Information (see in	struction	s on pa	age 17)		
1	At any tim	me during the 2009 calendar year, did the organization have an interest in or a signature or other	er authority	y over	a financial	Yes	No
		(bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F	90-22.1,	Report	of Foreign		
		Financial Accounts. If YES,enter the name of the foreign country here					X
2	During the	e tax year, did the organization receive a distribution from, or was it the grantor of, or transferor	to, a fore	ign trus	t?		Х
		ee page 5 of the instructions for other forms the organization may have to file.					
3		amount of tax-exempt interest received or accrued during the tax year					
Sch		A - Cost of Goods Sold. Enter method of inventory valuation					
1	•	at beginning of year		6			
2		7 Cost of goods sold. Subtra					
3		bor					
4 a		l section 263A costs Part I, line 2		7			
		chedule) 4a 8 Do the rules of section 2	`		spect to	Yes	No
		sts (attach schedule) . 4b property produced or acqu					3.7
		d lines 1 through 4b   5   to the organization?  benealties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and t	to the heet	of my kr	owledge and h	aliaf it	is true
Ci~-	correct a	and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		or my Kľ	owieuge allu D	onei, il	is liue,
Sigr Here					RS discuss this		
пет		ure of officer Date Title		ie prepai istructior	rer shown belows)? X Ye		
	- Januaru	Date		_	arer's SSN or F		No
Paid		Check if	ved	1 .	P007468		
•	arer's	Firm's name (or SMITH & HOWARD, P.C. EIN		12504		U -1	
Use	Only	yours if self-employed), address, and ZIP code address, and ZIP code	404				
		ATLANTA, GA 30363	,. 101	· , 1 (	Form <b>9</b>	90-T	(2009)
		, 311 3333			. 51111 0		,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

23-6390716 Form 990-T (2009) Page 3

Schedule C - Rent Income (see instructions on page 18		perty a	nd Personal Prop	erty	Leased W	ith Real Prop	erty)	
Description of property								
<u>(1)</u>								
(2)								
(3)								
(4)								
	2. Rent received	or accrue	ed					
(a) From personal property (if the personal property is more than more than 50%)	ercentage of rent n 10% but not	percenta	rom real and personal prop ige of rent for personal prop if the rent is based on profi	erty e	xceeds			ected with the income (attach schedule)
(1)								
(2)								
(3)								
(4)								
Total	T	otal						
(c) Total income. Add totals of collhere and on page 1, Part I, line 6,	. , . , ,					(b) Total deduct Enter here and or Part I, line 6, colu	n page 1,	
Schedule E - Unrelated De			ee instructions on pag	e 19	)			
1. Description of debt	t-financed property	,	2. Gross income from allocable to debt-finance			ctions directly conne debt-finance	d property	
·			property		(a) Straight (attach	aight line depreciation ittach schedule)		) Other deductions (attach schedule)
<u>(1)</u>								
(2)								
(3)								
(4)								
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  5. Average adjus of or allocab debt-financed property (attach schedule)		o erty	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
<u>(1)</u>				%				
(2)				%				
(3)				%				
(4)				%				
Totals  Total dividends-received deducti	ana ingludod in golum			<b>▶</b>	Part I, line 7,	. ,		nere and on page 1, line 7, column (B).
Schedule F - Interest, Ann			Ponts From Contro	المط	Organiza	tions coo instru	ctions on	n nago 20\
Schedule F - Interest, Am	iuities, Royaities		cempt Controlled Org			ilonis(see ilisiiu	CLIOTIS OF	i page 20)
Name of controlled organization			3. Net unrelated income (loss) (see instructions)		otal of specified yments made	5. Part of column included in the coorganization's group	ontrolling	6. Deductions directly connected with income in column 5
(1)								
(2)								
(3)								
(4)								
Nonexempt Controlled Organiz	zations							
7. Taxable Income	8. Net unrelated inc (loss) (see instruction		Total of specified payments made	d	include	t of column 9 that is d in the controlling ation's gross income		Deductions directly nected with income in column 10
(1)					3	<u> </u>		
(2)								
(3)								
(4)								
Totals		į			Enter here	ns 5 and 10. and on page 1, 8, column (A).	Enter	olumns 6 and 11. here and on page 1, line 8, column (B).

Schedule G -Investment II	ncome of a Sec	tion 501(c)(	7), (9	), or (17) Organi	izatio	n (see inst	ructi	ons on pag	e 20)		
1. Description of income		2. Amount of income  3. Deductions directly connected (attach schedule)				4. Set-asides (attach schedule)			5. Total deductions and set-asides (col. 3 plus col. 4)		
<u>(1)</u>											
(2)											
(3)											
(4)											
	Enter here and Part I, line 9, co								Enter here and on page Part I, line 9, column (B)		
Totals	•										
Schedule I - Exploited Exe	mpt Activity Inc	come. Othe	r Tha	an Advertising Ir	ncom	e (see instru	ction	s on page	21)		
Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income		4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5	<b>5.</b> (fror	attribi		6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).		
				through 7.							
<u>(1)</u>											
(2)											
(3)											
(4)											
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here an page 1, Par line 10, col. (	t I,						Enter here and on page 1, Part II, line 26.		
Schedule J - Advertising I	ncomo (soo instru	etions on na	ao 21	\							
	<u> </u>			<u> </u>							
Part I Income From Pe	riodicais Repor	ted on a Co	nsoi	laatea Basis			1				
1. Name of periodical	2. Gross advertising income	3. Direct advertising co	osts	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		6. Readership costs		7. Excess readershi costs (column 6 minus column 5, but not more than column 4).		
(1)											
(2)											
(3)											
									_		
(4)											
Totals (carry to Part II, line (5))	<u> </u>	41 0		-t- D!- /F		a adia adia ad di	. 4	Lia David II			
Part II Income From Pe			epara	ate Basis (For e	acn p	periodicai iis	stec	ı ın Part II	i, fiii in columns		
through 7 on a lin	ie-by-lifie basis.)										
1. Name of periodical	2. Gross advertising income	3. Direct advertising co	osts	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		5. Circulation 6. income		6. Readership costs	7. Excess readershi costs (column 6 minus column 5, but not more than column 4).		
(1)											
(1)											
(2)	+										
(3)											
(4)											
(5) Totals from Part I	Enter here and on page 1, Part I, line 11, col. (A).	Enter here an page 1, Par line 11, col. (	t I						Enter here and on page 1, Part II, line 27.		
Totals, Part II (lines 1-5)											
Schedule K - Compensation	on of Officers, D	Directors, a	nd Tr	<b>rustees</b> (see instru	ctions			<u> </u>			
1. Name							ensation attributable to related business				
							%				
							%				
							%				
							%				
Total. Enter here and on page 1, P	art II, line 14						. ▶				

Form **990-T** (2009)