### EXTENDED TO MAY 15, 2018

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Form 990 (2016)

			enaing J	<u>UN 30, 2017</u>	
Bc	Check if pplicable:	C Name of organization	<del></del>	D Employer identifi	cation number
	Address change	SOCIETY OF BIBLICAL LITERATURE			
	Name change	Doing business as		23-6	390716
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	
L	Final return/	825 HOUSTON MILL ROAD NE	350	•	)727-3100
_	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	4,177,224.
늗	Amende	ATLANTA, GA 30329	·	H(a) Is this a group re	
L.,	Applica- tion pending			for subordinates	? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		npt status: X 501(c)(3)	r 527	If "No," attach a	list. (see instructions)
		:▶ WWW.SBL-SITE.ORG		H(c) Group exemptio	
		rganization: X Corporation Trust Association Other >	L Year	of formation: 1980 N	1 State of legal domicile: VA
Activities & Governance	, p	riefly describe the organization's mission or most significant activities: ${\tt SEE} {\tt SOESCRIPTION}$ .	CHEDU	LE O FOR CO	MPLETE
nar					
ver	3 N	theck this box if the organization discontinued its operations or disposumber of voting members of the governing body (Part VI, line 1a)			
ß		umber of independent voting members of the governing body (Part VI, line 1b)	• • • • • • • • • • • • • • • • • • • •	3	14
S&	5 T	otal number of individuals employed in calendar year 2016 (Part V, line 1a)	••••••	4	<u>14</u> 22
itie	6 T	otal number of volunteers (estimate if necessary)	••••••	6	950
ctiv	7 a T	otal unrelated business revenue from Part VIII, column (C), line 12	••••••	7a	
Ă	b N	et unrelated business taxable income from Form 990-T, line 34	••••••	7a	0.
				Prior Year	
Revenue	8 C	ontributions and grants (Part VIII, line 1h)	<u> </u>	90,269.	Current Year 79,042.
	9 P	rogram service revenue (Part VIII, line 2g)		2,513,295.	2,575,015.
		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		92,045.	139,048.
œ	11 0	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		437,154.	533,222.
	12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,132,763.	3,326,327.
	13 G	rants and similar amounts paid (Part IX, column (A), lines 1-3)		5,335.	5,017.
	14 B	enefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,320,114.	1,353,661.
Expenses	<b>16a</b> P	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	b To	otal fundraising expenses (Part IX, column (D), line 25)   33,69	7.		
ш	17 0	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,633,911.	1,611,996.
	18 To	otal expenses. Add lines 13·17 (must equal Part IX, column (A), tine 25)		2,959,360.	2,970,674.
	19 R	evenue less expenses. Subtract line 18 from line 12		173,403.	355,653.
Net Assets or Fund Balances				inning of Current Year	End of Year
SSE	20 T	otal assets (Part X, line 16)		6,325,791.	7,166,851.
		otal liabilities (Part X, line 26)		1,655,897.	1,825,718.
	22 N	et assets or fund balances. Subtract line 21 from line 20		4,669,894.	<u>5,341,133.</u>
_		Signature Block			
Jnae	r penaiti	es of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	/ knowledge and belief, it is
rue,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of whi	ch preparer		
<b></b>		Signature of Officer		Date (1)	7
Sign	l l	,		Date ,	
Here	9	JOHN KUTSKO, EXECUTIVE DIRECTOR Type or print name and title	·		
	— <u></u>		A In	ate Check	PTIN
aid		Print/Type preparer's name  IARY JO ALEXANDER  MARY JO ALEXANDER	L 11	# -	<b>-</b> -'∣
	==	irm's name MAULDIN & JENKINS LLC	ħ./ _∏'	1727/17 sett-employe	#P00002534 58-0692043
Jse (		irm's address 200 GALLERIA PKWY SE STE 1700		FII II S EIN	J0-00J2043
-	· [	ATLANTA, GA 30339-5946		Phone no 77	0-955-8600
May	the IRS	6 discuss this return with the preparer shown above? (see instructions)		11 none no. 7 7	X Yes No
				<del> </del>	<u>                                   </u>

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Pa	Statement of Program Service Accomplishments	Х
		Λ
1	Briefly describe the organization's mission:	
	SEE SCHEDULE O FOR COMPLETE DESCRIPTION.	
2	Did the organization undertake any significant program services during the year which were not listed on the	ı
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 1,081,263 • including grants of \$ ) (Revenue \$ 1,425,860	<b>)</b> • )
	CONFERENCES. SBL ORGANIZES TWO MAJOR ANNUAL ACADEMIC CONFERENCES EACH	`
	YEAR, ONE IN THE UNITED STATES AND ONE OUTSIDE THE U.S. IT ALSO	
	SPONSORS REGIONAL MEETINGS IN THE U.S. THE MAJOR U.S. MEETING BRINGS	
	TOGETHER MORE THAN HALF OF ITS MEMBERS AS WELL AS MEMBERS OF AFFILIATE	3
	ORGANIZATIONS TO PRESENT OVER 1,000 SCHOLARLY PAPERS OF NEW RESEARCH I	ΙN
	HUNDREDS OF PROGRAM UNIT SESSIONS. THE CONFERENCE ALSO PROVIDES AN	
	EXHIBIT HALL FOR ACADEMIC PUBLISHERS AND A JOB SERVICE FOR ACADEMIC	
	INSTITUTIONS WHO INTERVIEW AND HIRE MEMBERS. THESE ANNUAL CONFERENCES	
	ARE HELD IN ORDER TO ACCOMPLISH SBL'S STRATEGIC VISION STATEMENTS:	
	ORGANIZING CONGRESSES FOR SCHOLARLY EXCHANGE; FACILITATING BROAD AND	
	OPEN DISCUSSION FROM A VARIETY OF CRITICAL PERSEPCTIVES; AND PROMOTING	1
	COOPERATION ACROSS GLOBAL BOUNDARIES.	_
	1 100 045	1 \
4b	(Code: ) (Expenses \$ 1,129,845 including grants of \$ ) (Revenue \$ 896,614 PUBLICATIONS SBL PRESS, THE PUBLISHING DEPARTMENT OF THE SOCIETY, IS	′
	MEMBER OF THE ASSOCIATION OF AMERICAN UNIVERSITY PRESSES, AND PUBLISHE	
	PEER-REVIEWED BOOKS AND JOURNALS FOR THE ACADEMIC COMMUNITY AND	
	LIBRARIES. THE PRESS ACQUIRES, DEVELOPS, PRODUCES, AND MARKETS 27 BOO	אר
	SERIES, THE FLAGSHIP JOURNAL OF THE FIELD, AND A JOURNAL FOR BOOK	)IL
	REVIEWS. TO DO SO THE PRESS HAS PROFESSIONAL STAFF AND OVER 130	
	VOLUNTEER MEMBERS WHO SERVE AS GENERAL EDITORS, AS SERIES EDITORS, AND	_
	ON EDITORIAL BOARDS. SBL PRESS'S ANNUAL BOOK OUTPUT IS 35 TITLES, IN	
	ADDITION TO THE TWO MAJOR JOURNALS. THE PRESS ALSO PARTNERS WITH OTHER	
	PRESSES TO PUBLISH MAJOR RESOURCES AND REFERENCE WORKS.	`
	FRESSES TO FODDISH MAJOR RESOURCES AND REFERENCE WORRS.	
_	79 93/	1 、
4C	(Code: ) (Expenses \$ 272,998. including grants of \$ 5,017.) (Revenue \$ 78,834) PROFESSIONS. SBL OFFERS A BROAD RANGE OF ACTIVITIES THAT SUPPORT ITS	<u>• •</u>
	MEMBERS' PROFESSIONAL DEVELOPMENT AND ADVOCATE FOR THE ACADEMIC FIELD	
	IN HIGHER EDUCATION. IT HOSTS AN EMPLOYMENT SERVICE, PROVIDES WORKSHOP	2.0
	AT ITS MEETINGS, PARTNERS WITH RELATED ORGANIZATIONS, COLLABORATES WIT	
	ORGANIZATIONS IN HUMANITIES AND HIGHER EDUCATION (SUCH AS THE NATIONAL	
	HUMANITIES ALLIANCE AND THE AMERICAN COUNCIL OF LEARNED SOCIETIES), AN	עוי
	FOSTERS PARTICIPATION THROUGH PROGRAM UNITS THAT ENLIST OVER 3,000 OF	
	ITS 8,500 MEMBERS AS CHAIRS, PRESENTERS, PRESIDERS, OR PANELISTS.	
	SUPPORTED BY A GRANT FROM THE NATIONAL ENDOWMENT FOR THE HUMANITIES, I	IN
	2014 SBL LAUNCHED AN INTERACTIVE WEBSITE CALLED BIBLE ODYSSEY TO	
	PROVIDE THE GENERAL PUBLIC WITH ACCURATE AND ENGAGING INFORMATION ABOUT	JT
	THE BIBLE, ITS CONTENTS, ITS BACKGROUND, AND ITS CULTURAL IMPACT.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 325,388 • including grants of \$ ) (Revenue \$ 589,953 •)	
40	Total program service expenses ▶ 2,809,494.	

# Form 990 (2016) SOCIETY OF BIBLICAL LITERATURE Part IV 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)?	,	х	
_	If "Yes," complete Schedule A	1	Λ	X
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2		21
3	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		х
٦	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	11c		21
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	- 110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		77	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	45		Х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		-21
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х

# Form 990 (2016) SOCIETY OF BIBLICAL LITERATURE Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			l
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations?	l		v
	If "Yes," complete Schedule N, Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	00		X
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
		34		X
	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

# Form 990 (2016) SOCIETY OF BIBLICAL LITERATURE Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part v					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	118			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r					
	(gambling) winnings to prize winners?		 I	1c	X	
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	22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
				3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		ــــــ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					l
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country: ►					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A					L
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to					١
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					7.7
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se			7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			_		- V
	to file Form 8282?	1	 I	7с		X
	If "Yes," indicate the number of Forms 8282 filed during the year		-+0	7.		х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		200			
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations maintaining denor advised funds. Did a denor advised fund maintaining			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	а бу ш	е	8		
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.			•		
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10 D	Section 501(c)(7) organizations. Enter:			30		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	10.5				
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>			
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
-	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
				14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b		
_		_		_	_	

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.

	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>l</u>							
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14	<u> </u>							
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		X					
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		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?								
6	Did the organization have members or stockholders?	6	Х						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a	Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	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	Х						
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 the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13	X						
14	Did 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	X						
b	Other officers or key employees of the organization	15b		Х					
	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		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
_	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed $ ightharpoonup GA$								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	ole						
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d finan	cial						
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records:								
	PAM KENNEMORE - 404-727-3103								
	825 HOUSTON MILL ROAD STE 350, ATLANTA, GA 30329								

### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

Leave this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A)	(B)			((	<b>C)</b>			(D)	(E)	(F)
Name and Title	Average hours per week	os, unless person is both an officer and a director/trustee)		Reportable compensation from related	Estimated amount of other					
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MICHAEL FOX	1.00	,,		37						
PRESIDENT	1.00	Х		Х				0.	0.	0.
(2) BRIAN BLOUNT	1.00	X		х				0.	0.	_
VICE PRESIDENT	1.00	^		Λ				0.	0.	0.
(3) STEVEN FRIESEN SECRETARY	1.00	X		х				0.	0.	0.
(4) MARY F. FOSKETT	1.00									
CHAIRMAN		Х		Х				0.	0.	0.
(5) EFRAIN AGOSTO	1.00									
MEMBER		Х						0.	0.	0.
(6) EHUD BEN ZVI	1.00									
MEMBER		Х						0.	0.	0.
(7) MARC BRETTLER	1.00									
MEMBER		Х						0.	0.	0.
(8) GAY BYRON	1.00									
MEMBER		Х						0.	0.	0.
(9) JUDITH NEWMAN	1.00							_	_	_
MEMBER		Х						0.	0.	0.
(10) JORUNN KLAND	1.00									
MEMBER		Х						0.	0.	0.
(11) DAN SCHOWALTER	1.00									
MEMBER	1 00	Х						0.	0.	0.
(12) GREGORY E. STERLING	1.00	١								
MEMBER	1 00	Х						0.	0.	0.
(13) GERALD WEST	1.00	,,								
MEMBER	1 00	Х						0.	0.	0.
(14) SIDNIE WHITE CRAWFORD	1.00	X						0.	0.	0.
MEMBER  (15) MONTGA TYOUGNA METANGUUON	1.00	^						0.	0.	0.
(15) MONICA JYOTSNA MELANCHTON MEMBER	1.00	X						0.	0.	0.
(16) CHRIS ROLLSTON	1.00									
MEMBER		x						0.	0.	0.
(17) BEVERLY GAVENTA	1.00									
MEMBER		х						0.	0.	0.
632007 11-11-16	•		•		_	•	_			Form <b>990</b> (2016)

632007 11-11-16 Form **990** (2016)

Part VII   Section A. Officers, Directors, Tru (A)	(B)	<del>ری.ح)</del>	,		<u> </u>	9.10	<u> </u>	(D)	(E)			(F)	
Name and title	Average	Position						Reportable	Reportable		Fed	( ) timate	ad.
Name and title	hours per			heck ss pe				compensation	compensation			ount	
	week			nd a d				from	from related		I	other	01
	(list any	ctor						the	organization	s	comp	oensa	tion
	hours for	r director				ted		organization	(W-2/1099-MIS	SC)	fro	om th	е
	related	stee c	rustee			eusa		(W-2/1099-MISC)				anizat	
	organizations below	al tru	onal t		loyee	comp						l relat	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	nizati	ons
(18) JOHN F. KUTSKO	60.00	=	Ë	JO.	-S	主旨	요						
	00.00	1		Х				149,260.		0.	3 (	0,8	QQ
TREASURER, EXEC DIRECTOR	45.00			Δ				149,200.		0.	3(	, 0	00.
(19) PAM KENNEMORE	45.00	1				x		104,609.		0.	1.	7 /	06
DIRECTOR FINANCE/ADMIN						^	_	104,009.		0.		7,4	00.
		-											
	1		_										
		4											
	+												
		4											
	1	<u> </u>	-		$\vdash$		_						
		-											
							_						
		4											
	-						_						
		4											
							Ļ	252 060		_	1 1	2 2	0.4
1b Sub-total								253,869.		0.	40	3,2	
c Total from continuation sheets to Part \								253,869.		0.	1 1	3,2	0.
d Total (add lines 1b and 1c)								· · · · · · · · · · · · · · · · · · ·			40	o , <u>∠</u>	94.
2 Total number of individuals (including but	not limited to th	nose	liste	ed al	DOV	e) wł	no r	eceived more than \$100	0,000 of reportab	le			2
compensation from the organization												Yes	No
												res	NO
3 Did the organization list any <b>former</b> officer													v
line 1a? If "Yes," complete Schedule J for											3		X
4 For any individual listed on line 1a, is the s	•							•	•			Х	
and related organizations greater than \$15											4	^	
5 Did any person listed on line 1a receive or	•				•			•			_		Х
rendered to the organization? If "Yes," con Section B. Independent Contractors	ripiete Scriedui	e J i	Or S	ucn	pers	SOII					5		22
· · · · · · · · · · · · · · · · · · ·	ampapatad in	don	on de	nt o	ont			that received mare than	¢100,000 of oon	2000	otion f		
<ol> <li>Complete this table for your five highest c the organization. Report compensation for</li> </ol>	-	-								iperis	alion	OIII	
(A)	trie caleridar y	eai	enui	ng v	VILII	OI W	101111	(B)	year.		(C	`	
Name and busines	s address	N	INC	F.				Description of s	ervices	C	omper		n
							$\dashv$	'			•		
							$\dashv$						
							$\neg$						
2 Total number of independent contractors	including but r	ot li	mite	d to	tho	se li	stec	d above) who received n	nore than				
\$100,000 of compensation from the organ	ization >				(	0							

Form 990 (2016) SOCIETY
Part VIII | Statement of Revenue

		Check if Schedule O conta	aine a reenonee	or note to any lir	ne in this Part VIII			
		Check if Schedule O conta	allis a response	or note to any iii	(A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	k c c e f	a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributi f All other contributions, gifts, grant similar amounts not included abov g Noncash contributions included in lines h Total. Add lines 1a-1f	1c 1d 1d ions) 1e ts, and ve 1f 1a-1f: \$	79,042. 121.	79,042.			
				Business Code				
9		a CONGRESSES			1,425,860.	1,425,860.		
e Zi		b MEMBERSHIP DUES		611600	633,847.	589,953.		43,894.
n Si	-	PUBLICATIONS		323100	436,474.	410,449.		26,025.
Program Service Revenue	C	PROFESSIONS		541900	78,834.	78,834.		
roc_		e						
-		f All other program service reve			2,575,015.			
	3	Income from investment of tax	dividends, intere	est, and  proceeds	109,229.			109,229.
	5	Royalties			93,410.			93,418.
	k	a Gross rents b Less: rental expenses c Rental income or (loss)	(i) Real 134,791. 180,952. -46,161.	(ii) Personal				
	c	d Net rental income or (loss)		<b>&gt;</b>	-46,161.			-46,161.
	7 a	<b>a</b> Gross amount from sales of assets other than inventory	(i) Securities 657,406.	(ii) Other				
		b Less: cost or other basis and sales expenses c Gain or (loss)	627,587. 29,819.		22 21 2			22 212
		d Net gain or (loss)		<b></b>	29,819.			29,819.
Other Revenue	8 a	<ul> <li>Gross income from fundraising including \$         contributions reported on line</li> </ul>	of 1c). See					
ř		Part IV, line 18						
₹		b Less: direct expenses		L				
		<ul><li>c Net income or (loss) from fund</li><li>a Gross income from gaming ac</li></ul>	-	·············				
		Part IV, line 19  b Less: direct expenses	а					
		c Net income or (loss) from gam						
	10 a	a Gross sales of inventory, less and allowances b Less: cost of goods sold	returns a		105 155	10.5 1.55		
ļ	C	c Net income or (loss) from sale			486,165.	486,165.		
-		Miscellaneous Revenu	e	Business Code				
	11 a							
		b						
		<b>c d</b> All other revenue						
		e Total. Add lines 11a-11d		<b></b>				
	12	Total revenue. See instructions.			3,326,327.	2,991,261.	0.	256,024.

#### 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).

0001	on 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon				
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		•		
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	- 04-	- 04-		
	individuals. See Part IV, lines 15 and 16	5,017.	5,017.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	102 405	185 515	6 000	1 600
	trustees, and key employees	183,485.	175,515.	6,282.	1,688.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	910,517.	070 522	21 566	0 /10
7	Other salaries and wages	91U, 31/•	870,533.	31,566.	8,418.
8	Pension plan accruals and contributions (include	84,988.	81,493.	2,733.	762.
_	section 401(k) and 403(b) employer contributions)	102,080.	97,882.	3,282.	916.
9	Other employee benefits	72,591.	69,535.	2,392.	664.
10	Payroll taxes	72,3310	05,555.	2,352.	004.
11	Fees for services (non-employees):				
	Management	17,022.	16,310.	435.	277.
	Legal	17,951.	10,310.	17,951.	2116
	Accounting Lobbying	1,1331.		1,7551	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	24,543.		24,543.	
	Other. (If line 11g amount exceeds 10% of line 25,	, -		,	
9	column (A) amount, list line 11g expenses on Sch O.)	153,177.	140,008.	2,325.	10,844.
12	Advertising and promotion	13,680.	13,620.	50.	10,844.
13	Office expenses	111,808.	105,548.	4,932.	1,328.
14	Information technology	313,828.	303,403.	9,248.	1,177.
15	Royalties	44,029.	44,029.		
16	Occupancy	66,001.	52,431.	9,900.	3,670.
17	Travel	383,283.	375,743.	5,406.	2,134.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	47,839.	47,839.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	23,238.	20,449.	2,324.	465.
23	Insurance	16,420.	14,548.	1,470.	402.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	252 575	252 162	205	120
а	PUBLISHING COSTS	252,575.	252,160.	285.	130.
b	BANK FEES	81,640.	80,784.	721.	135.
С	DONATIONS AND DISCOUNTS	44,205. 757.	41,890. 757.	1,638.	677.
d	OTHER	/5/•	/5/•		
	All other expenses	2,970,674.	2,809,494.	127,483.	33,697.
25	Total functional expenses. Add lines 1 through 24e	4,310,014.	4,003,434.	1403.	33,037.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				
	Check here if following SOP 98-2 (ASC 958-720)				F 000 (0040)

Form 990 (2016)

Part X Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
		·	(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	1,366,444.	1	1,579,753.
	2	Savings and temporary cash investments	228,825.	2	182,418.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	159,434.	4	151,135.
	5	Loans and other receivables from current and former officers, directors,	•		,
	•	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ιχ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	103,545.	8	97,215.
	9	Prepaid expenses and deferred charges	49,010.	9	70,621.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 156,850.			
	Ь	Less: accumulated depreciation 10b 126, 365.		10c	30,485.
	11	Investments - publicly traded securities	2,454,030.	11	30,485. 3,117,468.
	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	1,913,079.	15	1,937,756.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,325,791.	16	7,166,851.
	17	Accounts payable and accrued expenses	215,264.	17	233,353.
	18	Grants payable		18	
	19	Deferred revenue	1,440,633.	19	1,592,365.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
≝		key employees, highest compensated employees, and disqualified persons.			
Liabilities		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 (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,655,897.	26	1,825,718.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc anc	27	Unrestricted net assets	3,953,974.	27	4,521,267.
Bala	28	Temporarily restricted net assets	421,290.	28	525,236.
- Pu	29	Permanently restricted net assets	294,630.	29	294,630.
Ī		Organizations that do not follow SFAS 117 (ASC 958), check here			
Ģ		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	4 550 00:	32	F 0.14 1.25
2	33	Total net assets or fund balances	4,669,894.	33	5,341,133.
	34	Total liabilities and net assets/fund balances	6,325,791.	34	7,166,851.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,32		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,97		
3	Revenue less expenses. Subtract line 2 from line 1	3		5,6	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,66		
5	Net unrealized gains (losses) on investments	5	31	5,5	86.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5,34	<u>1,1</u>	33.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				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	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2016)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

Employer identification number \*\*-\*\*\*0716

Pa	rt I	Reason for Public (	Charity Status (	All organizations must co	mplete th	is part.) Se	ee instructions.			
The	orgar	nization is not a private found A church, convention of ch	•		•	•				
2	一	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990 or 990-EZ).)								
	$\Box$									
3	$\vdash$	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
4		A medical research organiz city, and state:	ation operated in co	njunction with a hospita	described	d in <b>sectio</b>	n 170(b)(1)(A)(iii). Enter	the hospital's name,		
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
Ū	_	section 170(b)(1)(A)(iv). (C		mege of animorally evilled	а от орога		ovommonical arms accord	304 II.		
6		A federal, state, or local gov	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).			
7		An organization that norma	lly receives a substa	intial part of its support f	rom a gov	ernmental	unit or from the general	public described in		
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in <b>section 170(b)</b>	( <b>1)(A)(vi).</b> (Complete Par	t II.)					
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	ınction with a land-grant	college		
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of the colleg	je or		
		university:								
10	X	An organization that norma	lly receives: (1) more	than 33 1/3% of its sup	port from	contributi	ons, membership fees, a	and gross receipts from		
		activities related to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of its suppor	t from gross investment		
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the organization	after June 30, 1975.		
		See section 509(a)(2). (Cor				·		·		
11		An organization organized a		ively to test for public sa	fetv. See	section 50	09(a)(4).			
12		An organization organized a	•	*	•			e purposes of one or		
-		more publicly supported or	=	•	-		•			
		lines 12a through 12d that						SHOOK THE BOX III		
_		7				•	· · · · · ·	, aivina		
а			· · · · · · · · · · · · · · · · · · ·	•	•					
		the supported organization			a majority (	of the dire	ctors or trustees of the s	supporting		
		organization. You must o	=							
b			· ·					-		
		control or management o	f the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported		
		organization(s). <b>You mus</b>	t complete Part IV,	Sections A and C.						
С			grated. A supporting	g organization operated	in connec	tion with, a	and functionally integrate	ed with,		
	_	_ its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.			
d			<b>/ integrated.</b> A supp	orting organization oper	ated in co	nnection v	vith its supported organi	ization(s)		
		that is not functionally int	egrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and an attent	iveness		
		requirement (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	A and D,	and Part	V.			
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type II, Type III			
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organiz	zation.				
f	Ente	er the number of supported o	organizations							
g	Pro	vide the following information	about the supporte	ed organization(s).						
	(	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other		
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)		
Tata	<u> </u>									

#### 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						_
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	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,						
	(6)						
6	Public support. Subtract line 5 from line 4.						
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	(a) 2012	(8) 2010	(0) 2014	(4) 2013	(6) 2010	(i) Total
	Gross income from interest,						
Ü	dividends, payments received on						
	securities loans, rents, royalties						
•	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10		)			10	
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	Ü	, ,	•	•	( )( )	. □
Sec	organization, check this box and stop ction C. Computation of Publi	c Support Pe	rcentage				<u></u>
	Public support percentage for 2016 (li			column (f))		14	%
	Public support percentage from 2015					15	
	33 1/3% support test - 2016. If the or						
	<b>stop here.</b> The organization qualifies a	•		•		•	
h	<b>33 1/3% support test - 2015.</b> If the o						
_	and <b>stop here.</b> The organization qualit						<b>.</b>
17a	10% -facts-and-circumstances test						or more.
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t				=	-	
h	10% -facts-and-circumstances test						
J	more, and if the organization meets th	_					
	organization meets the "facts-and-circ				-		
18	<b>Private foundation.</b> If the organization						
		a not oncon a	20x 011 1110 10, 10	-a, 100, 114, 01 11	~, 5.100K tillo box t	555 156 45601	

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	elow, please comp	nete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and	(4) 2012	(2) 2010	(0) 2011	(4) 2010	(0) 2010	(i) rotal
·	membership fees received. (Do not						
	include any "unusual grants.")	156,749.	216,282.	97,553.	90,269.	79,042.	639,895.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	2921137.	2446792.	3188302.	2891907.	3033619.	14481757.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-				60 455	60 010	
	iness under section 513		82,702.	72,385.	63,475.	69,919.	288,481.
4	Tax revenues levied for the organ-						
	ization'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	22552	0045006	2252212	2045654	24 2 2 5 2 2	4 5 4 4 4 4 4 4
6	Total. Add lines 1 through 5	3077886.	2745776.	3358240.	3045651.	3182580.	15410133.
78	Amounts included on lines 1, 2, and			4 600	0 656		4.7.006
	3 received from disqualified persons		3,000.	4,680.	2,656.	7,050.	17,386.
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
,	Add lines 7a and 7b		3,000.	4,680.	2,656.	7,050.	17,386.
	Public support. (Subtract line 7c from line 6.)		0,000				15392747.
Se	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6	3077886.	2745776.	3358240.	3045651.	3182580.	(f) Total 15410133.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties	349,722.	293,852.	240,565.	235,166.		1321752.
	and income from similar sources	349,144.	493,034.	240,303.	233,100.	202,447.	1341/34.
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975	242 522	000 050	0.40 5.55	005 466	000 445	4004550
	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	349,722.	293,852.	240,565.	235,166.	202,447.	1321752.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	3427608.	3039628.	3598805.	3280817.	3385027.	16731885.
	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	zation,
	check this box and stop here						
Se	ction C. Computation of Publi	ic Support Per	rcentage				
15	Public support percentage for 2016 (I	ine 8, column (f) di	vided by line 13, c	olumn (f))		15	92.00 %
16	Public support percentage from 2015	Schedule A, Part	III, line 15			16	91.28 %
Se	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20	16 (line 10c, colun	nn (f) divided by lir	e 13, column (f))		17	7.90 %
18	Investment income percentage from 2	<b>2015</b> Schedule A,	Part III, line 17			18	8.66 %
19	33 1/3% support tests - 2016. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line	
	more than 33 1/3%, check this box at 33 1/3% support tests - 2015. If the	nd <b>stop here.</b> The	organization qual	fies as a publicly s	supported organiza	ation	<b>▶</b> X
•	line 18 is not more than 33 1/3%, che	•			•	·	
20	Private foundation. If the organization						

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	За		
	3b		
	3с		
	4-		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
n 9	90 or 99	90-EZ)	2016

Da	NAME OF THE OWN OF THE PARTY OF THE OWN OF THE OWN OF THE OWN OWN OF THE OWN		- 10	igo <b>o</b>
Ра	rt IV   Supporting Organizations <sub>(continued)</sub>			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
800	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
a	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		.1	
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	). Yes	N.
2	Activities Test. Answer (a) and (b) below.		res	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
h	·	Za		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	ZIJ		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
J	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
	11 5			

Pa	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	anizations	i i i i i i i i i i i i i i i i i i i
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust o	n Nov. 20, 1970 (explain in	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	y integra	ated Type III supporting org	ganization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2016

Par	¹t V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions		<u> </u>	Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exempt			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which t	he organization is responsive	Э	
	(provide details in <b>Part VI</b> ). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	·	i	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а	, , ,			
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
_	and 4c			
8	Breakdown of line 7:			
<u>а</u>				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
е	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	(Form 990 or 990-E	Z) 2016	SOCIET	Y OF	$\mathtt{BIBL}$	ICAL	LIT	ERATURE		**_*	**0716	Page 8
Part VI	Supplementa Part IV, Section A line 1; Part IV, Sec Section D, lines 5	I Inform , lines 1, 2 ction D, lin , 6, and 8;	<b>nation.</b> Pro 2, 3b, 3c, 4b, nes 2 and 3;	vide the 4c, 5a, Part IV,	e explanati 6, 9a, 9b, Section E,	ons requ 9c, 11a, lines 1c	ired by F 11b, an , 2a, 2b,	Part II, line 10; d 11c; Part IV, 3a, and 3b; Pa	Section B, lines art V, line 1; Part '	r 17b; Par 1 and 2; Pa V, Section	t III, line 12; art IV, Sectic B, line 1e; P	on C,
	(See instructions.	)										

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

**Employer identification number** \*\*-\*\*\*0716

Pa	rt I Organizations Maintaining Donor Adviso	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, li	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the or		
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year ▶		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cons	servation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conserva	tion easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	tion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Forr	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue staten	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	chibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	I gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
h	Assets included in Form 990 Part Y		

	t III Organizations Maintaining C	ollections of Ar			or Othe	r Similar A			Page A
3	Using the organization's acquisition, accession								
3	(check all that apply):	on, and other record	s, check any or the	ioliowing tha	i are a sig	grillicarit use	UI ILS (	JOHECTION	i ileiiis
_	Public exhibition	d	Loop or evol	aanaa nraara	mo				
a			Loan or excl	larige progra	11115				
b	Scholarly research	е	Other						
C	Preservation for future generations	lla akiawa awal awalain				:	- D	VIII	
4	Provide a description of the organization's co						n Pan	. XIII.	
5	During the year, did the organization solicit or							Yes	
Dai	to be sold to raise funds rather than to be ma								No
rai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Part	-	ete ir the organization	n answered	Yes on i	Form 990, Pa	rt IV,	line 9, or	
10	Is the organization an agent, trustee, custodia		ion, for contribution	o or other oc	soto not i	noludod			
ıa							X	Yes	□ No
<b>L</b>	on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII a						22	1 res	NC
b	in res, explain the arrangement in Part XIII a	and complete the fol	llowing table.					Amount	
_	Deginning belongs					10		Amount 6	,898
	Beginning balance								.,596
	Additions during the year								3,505
_	Distributions during the year								-11
f 20	Ending balance  Did the organization include an amount on Fo					. <b>If</b>		Yes	X No
	If "Yes," explain the arrangement in Part XIII.					ıy ?	🖳	] 162	
Par						 ∩			
. u.	2 1 2 1 and 5 1 and 5 complete in	(a) Current year	(b) Prior year	(c) Two year		<b>d)</b> Three years	hack	(a) Four	years back
12	Beginning of year balance	642,854.	577,546.	, ,	1,769.	506,			437,587
	Contributions	200.	50,485.		410.		300.		250
	Net investment earnings, gains, and losses	26,638.	23,141.	2.3	3,745.		659.		68,589
4	Grants or scholarships	20,000.	20,212.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Other expenditures for facilities								
C	and programs					46	000.		
f	Administrative expenses	1,815.	8,318.	1	L,378.		337.		279
		667,877.	642,854.		7,546.	554,			506,147
g 2	End of year balance		•		, = = = •		, <sub> </sub>		, , , , , , , , ,
	Board designated or quasi-endowment	ent year end balanc	e (iirie 19, coldiiii (a %	ij) Heid as.					
	Permanent endowment 40.00	%							
	Temporarily restricted endowment ► 60								
·	The percentages on lines 2a, 2b, and 2c shou								
32	Are there endowment funds not in the possess		ation that are held a	nd administe	red for th	e organizatio	n		
ou	by:	solon of the organiza	ation that are note a	na aaniinioto	100 101 111	o organizatio		Г	Yes No
	(i) unrelated organizations							3a(i)	X
	(2)							3a(ii)	X
h	If "Yes" on line 3a(ii), are the related organization							3b	
4	Describe in Part XIII the intended uses of the							0.0	I
	t VI Land, Buildings, and Equipm		one idilido.						
	Complete if the organization answered		). Part IV. line 11a. S	ee Form 990	). Part X. I	ine 10.			
	Description of property	(a) Cost or of				cumulated		(d) Book	value
	2000.plus 31 proporty	basis (investm	` '			reciation		, 2, 2001	
1a	Land	<u> </u>		<u> </u>					
	Buildings								
	Leasehold improvements						1		
	Equipment		15	6,850.	1	26,365		30	,485
	Other			-		•	$\top$		-

Schedule D (Form 990) 2016

30,485.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII	Investments -	Other	Securities.

Investments - Other Securities.  Complete if the organization answered "You	es" on Form 990 Part IV lin	e 11h See Form 990 Part X line 12	
(a) Description of security or category (including name of security		(c) Method of valuation: Cost or en	id-of-year market value
(1) Financial derivatives		, ,	,
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<b>&gt;</b>		
Part VIII Investments - Program Related	•		
Complete if the organization answered "Ye	es" on Form 990, Part IV, lin	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	id-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	<b>&gt;</b>		
Part IX Other Assets.			
Complete if the organization answered "Ye		e 11d. See Form 990, Part X, line 15.	
	(a) Description		(b) Book value
(1) LUCE CENTER FIXED ASSETS			1,323,394
(2) LUCE CENTER ENDOWMENT FU	JND		614,362.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		<u> </u>	1 027 756
Total. (Column (b) must equal Form 990, Part X, col. (B)	line 15.)	<b>&gt;</b>	1,937,756.
Part X Other Liabilities.			_
Complete if the organization answered "Yo	es" on Form 990, Part IV, IIn		5.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	(" 05)		
Total. (Column (b) must equal Form 990, Part X, col. (B)		As the appropriation of the state of the sta	

Liability for uncertain tax positions. In Part XIII, 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 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

4c

2,970,674

Part XI	Recond	ciliation	of Revenue	per	Audited	<b>Financial</b>	<b>Statements</b>	With	Revenue	per R	eturn.

rai	Reconciliation of Revenue per Audited Financial S	statements with	Revenue per Re	eturi	1.
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	3,750,695.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	315,586.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d					
е	Add lines 2a through 2d			2e	315,586.
3	Subtract line 2e from line 1			3	3,435,109.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-108,782.		
С	Add lines 4a and 4b			4c	-108,782.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	3,326,327.
Pa	rt XII Reconciliation of Expenses per Audited Financial	Statements With	n Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.			
1	Total expenses and losses per audited financial statements			1	3,079,456.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	108,782.		
е	Add lines 2a through 2d			2e	108,782.
3	Subtract line 2e from line 1			3	2,970,674.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			

#### Part XIII Supplemental Information.

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART IV, LINE 1B:

c Add lines 4a and 4b

SBL SELLS PUBLICATIONS FOR BROWN JUDAIC STUDIES, WILLIAM CAREY UNIVERSITY

INTERNATIONAL PRESS, SHEFFIELD PHOENIX AND NIDA. 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.

ENDOWMENT IS HELD FOR CAPITAL IMPROVEMENTS TO THE LUCE CENTER BUILDING

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.

THIRD ENDOWMENT IS HELD TO PUBLISH CONTENT TO OUR BIBLE ODYSSEY WEBSITE.

PART X, LINE 2:

MANAGEMENT HAS DETERMINED THAT THE SOCIETY DOES NOT HAVE ANY UNCERTAIN TAX

POSITIONS AND ASSOCIATED UNRECOGNIZED BENEFITS THAT MATERIALLY IMPACT THE

FINANCIAL STATEMENTS OR RELATED DISCLOSURES.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RECLASS CO	ST OF GOODS S	OLD AGAINST	REVENUE	-42,358.
RECLASS EX	PENSE AGAINST	RENTAL INC	OME	-66,424.

TOTAL TO SCHEDULE D, PART XI, LINE 4B -108,782.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASS COST OF GOODS SOLD AGAINST REVENUE	42,358.
RECLASS EXPENSE AGAINST RENTAL INCOME	66,424.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	108,782.

#### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

**Statement of Activities Outside the United States** 

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

Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

Name of the organization

**Employer identification number** 

SOCIETY OF BIBL	ICAL LIT	ERATURE			**-***071	6
		ctivities Out	tside the United States. Comple	ete if the organi	zation answered "Y	'es" on
Form 990, Part IV						
			ds to substantiate the amount of its gra			.,
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assis	stance? X	Yes  No
2 For grantmakers. Desc	ribo in Part V the	organization's I	procedures for monitoring the use of it	e grante and ot	nor assistance outs	side the
United States.	inbe in Fait v the	organization s į	procedures for monitoring the use of it	s grants and ou	iler assistance outs	side trie
	he following Part	L line 3 table ca	an be duplicated if additional space is i	needed )		
(a) Region			(d) Activities conducted in the region		ity listed in (d)	(f) Total
(-7 9	offices	èmplovees.	(by type) (such as, fundraising, pro-	l .	ram service,	expenditures
	in the region		gram services, investments, grants to		specific type	for and investments
		contractors in the region	recipients located in the region)	of service(	s) in the region	in the region
		iii tiio region				-
SEOUL, SOUTH KOREA	0	0	PROGRAM SERVICES	CONFERENCES		30,601.
3 a Sub-total	0	0				30,601.
<b>b</b> Total from continuation						, , ,
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0				30,601.

			Outside the United States. Contacted if additional space is ne		rganization answered	d "Yes" on Form	990, Part IV, line 15, for	any
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
the IRS, or for which t	the grantee or couns	el has provided a section	recognized as charities by the n 501(c)(3) equivalency letter					

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

Part III can be duplicated if a	additional space is neede			<del>1</del>			1
(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
				PAID AT MEETING AFTER			ACTUAL US
TRAVEL TO AM IN SAN ANTONIO	NIGERIA	1	2,000.	PRESENTATION OF RECEIPTS	0.		DOLLARS
MDANIEL MO AM IN GAN ANMONTO	DEL GILIM			PAID AT MEETING AFTER	0		ACTUAL US
TRAVEL TO AM IN SAN ANTONIO	BELGIUM	1	1,000.	PRESENTATION OF RECEIPTS	0.		DOLLARS
				DATE AN MERCHAN ARMED			A COMPLETE A LIG
TRAVEL TO AM IN SAN ANTONIO	COSTA RICA	1		PAID AT MEETING AFTER PRESENTATION OF RECEIPTS	0.		ACTUAL US DOLLARS
			·				
				PAID AT MEETING AFTER			ACTUAL US
TRAVEL TO AM IN SAN ANTONIO	GUATEMALA	1	1,000.	PRESENTATION OF RECEIPTS	0.		DOLLARS

### Schedule F (Form 990) 2016 SPART IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2016

Page 5

#### Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of

investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
PART I, LINE 2:
GRANTS PROVIDED TO BRING MEMBERS OUTSIDE THE US TO SBL'S MEETINGS ARE
MONITORED FOR PROPER USE OF FUNDS BY NOT PROVIDING THE FUNDS UNTIL AN
INDIVIDUAL ATTENDS THE MEETINGS OR BY PURCHASING A TICKET ON THEIR BEHALF
TO COME TO THE MEETING.
PART I, LINE 3:
PAYMENTS TO VENDORS IN SOUTH KOREA FOR INTERNATIONAL MEETINGS.
PART III, COL (C):
INDIVIDUALS SENT TO TRAVEL

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

**Compensation Information** 

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

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

► Attach to Form 990.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

SOCIETY OF BIBLICAL LITERATURE

**Employer identification number** \*\*-\*\*\*0716

Pa	art I 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 on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  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 (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are 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 explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on 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		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on 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" on line 5a or 5b, describe in Part III.			
6	For persons listed on 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		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	l	

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

Schedule J (Form 990) 2016

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation		(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) JOHN F. KUTSKO	(i)	147,078.	2,182.	0.	15,326.	15,562.	180,148.	0.
TREASURER, EXEC DIRECTOR	(ii)	0.	0.	0.		0.		
	(i)							
	(ii)							
	(i)							
	(ii)							ļ
	(i)							
	(ii) (i)							<del>                                     </del>
	(ii)							
	(i)							
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	(ii)							<del> </del>
	(i) (ii)							<del>                                     </del>
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Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 1A:
EXECUTIVE DIRECTOR'S WIFE VOLUNTEERS AT THE ANNUAL MEETING. AIRFARE AND
MEALS ARE PROVIDED FOR ALL VOLUNTEERS AT THE MEETING.
PART I, LINE 7:
JOHN KUTSKO RECEIVED A \$2,182 BONUS REPORTED ON HIS 2016 W-2. BONUSES ARE
NOT BASED ON REVENUE OR NET EARNINGS OF THE ORGANIZATION.

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

b Open to Public Inspection

OMB No. 1545-0047

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number** \*\*-\*\*\*0716

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: TO FOSTER BIBLICAL SCHOLARSHIP AND PROVIDE ITS MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT, INTELLECTUAL GROWTH, AND PROFESSIONAL DEVELOPMENT. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: SBL'S MISSION IS TO FOSTER BIBLICAL SCHOLARSHIP. THE SOCIETY OFFERS ITS MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT, INTELLECTUAL GROWTH, AND PROFESSIONAL DEVELOPMENT THROUGH ADVANCING ACADEMIC STUDY OF BIBLICAL TEXTS AND THEIR CONTEXTS AS WELL AS OF THE TRADITIONS AND CONTEXTS OF BIBLICAL INTERPRETATION. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ALL OTHER PROGRAM ACTIVITIES. EXPENSES \$ 325,388. INCLUDING GRANTS OF \$ 0. REVENUE \$ 589,953. FORM 990, PART VI, SECTION A, LINE 6: THE SOCIETY HAS 8,501 MEMBERS. FORM 990, PART VI, SECTION A, LINE 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 ORGANIZATION IS THEN GIVEN THE RESPONSIBILITY TO MAKE DECISIONS ON BEHALF OF THE ORGANIZATION.

Name of the organization SOCIETY OF BIBLICAL LITERATURE

Employer identification number \*\*-\*\*\*0716

FORM 990, PART VI, SECTION B, LINE 11B:

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, LINE 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, LINE 15A:

SBL USES COMPARABLE DATA FROM NONPROFIT ORGANIZATIONS IN OUR INDUSTRY TO
BENCHMARK PAY, INCLUDING COMPENSATION SURVEYS OF UNIVERSITY PRESSES,
PROFESSIONAL MEMBERSHIP ORGANIZATIONS, AND OTHER NOT-FOR-PROFITS, IN ORDER
TO MATCH STAFFING AND FUNCTIONAL COMPETENCIES. DATA FROM THESE MARKET
SEGMENTS ARE USED TO FORM A "MARKET COMPOSITE" TO ASSESS THE
COMPETITIVENESS OF COMPENSATION. EXECUTIVE DIRECTOR COMPENSATION POLICY IS
ADMINISTERED BY THE FINANCE COMMITTEE. IT IS RESPONSIBLE FOR ESTABLISHING
AND MAINTAINING A COMPETITIVE COMPENSATION PACKAGE FOR THE ORGANIZATION'S
EXECUTIVE DIRECTOR. THE COMMITTEE REVIEWS COMPENSATION AND MAKES
RECOMMENDATIONS FOR ANY CHANGES TO COUNCIL (BOARD OF DIRECTORS) AS
APPROPRIATE. THE COUNCIL ALSO REVIEWS AND APPROVES THE EXECUTIVE DIRECTOR'S
SALARY.

SOCIETY OF BIBLICAL LITERATURE	**-***0716
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF IN	TEREST POLICY ARE
AVAILABLE TO THE PUBLIC UPON REQUEST. FINANCIAL STATEMENT	'S ARE PUBLISHED
ANNUALLY ON THE SBL WEBSITE, GUIDESTAR, AND ARE ALSO AVAI	LABLE UPON
REQUEST.	
FORM 990 PART XII LINE 2C	
THERE HAS BEEN NO CHANGE IN THE AUDITORS FROM THE PREVIOU	S YEAR.

#### Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

### Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

#### Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Employer identification number (EIN) or Type or Name of exempt organization or other filer, see instructions. print \*\*-\*\*\*0716 SOCIETY OF BIBLICAL LITERATURE File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 825 HOUSTON MILL ROAD NE, NO. 350 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions ATLANTA, GA 30329 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Application Return Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF Form 5227 10 04 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 PAM KENNEMORE The books are in the care of ► 825 HOUSTON MILL ROAD STE 350 - ATLANTA, GA 30329 Telephone No. ► 404-727-3103 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this 」. If it is for part of the group, check this box ▶ 🔛 and attach a list with the names and EINs of all members the extension is for. MAY 15, 2018 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: \_\_\_ calendar year ightharpoonup | X | tax year beginning JUL 1, 2016 JUN 30, 2017 , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. \$ За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Form 8868 (Rev. 1-2017)

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