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

SIGNATURE...

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

FILING...

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

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

PAYMENT OF TAX...

NO PAYMENT OF TAX IS REQUIRED.

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

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

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

SIGNATURE...

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

FILING...

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

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

PAYMENT OF TAX...

NO PAYMENT OF TAX IS REQUIRED.

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

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A F	or the	e 2009	calen	dar year, or tax year beginning 07/01, 2009, and ending	06,	/30, 20 10						
В с	heck if app	olicable:	Please	C Name of organization SOCIETY OF BIBLICAL LITERATURE	D Employer identific	ation number						
	Addre		use IRS label or	Doing Business As	23-6390716							
	7 1	change	print or	Number and street (or P.O. box if mail is not delivered to street address) Room/suit	e E Telephone number							
	Initial	· ·	type. See	825 HOUSTON MILL ROAD NE 350	(404) 727-3	(404) 727-3100						
	+		Specific	City or town, state or country, and ZIP + 4	(101) 121 3	100						
	Termir		Instruc- tions.		C Cross respires f	2 710 500						
	return	ļ		ATLANTA, GA 30329	G Gross receipts \$	2,710,590.						
	Applic pendir	ng		me and address of principal officer: JOHN KUTSKO	H(a) Is this a group return affiliates?	for Yes X No						
			825	HOUSTON MILL ROAD STE 350 ATLANTA, GA 30329	H(b) Are all affiliates inclu	ided? Yes No						
I	Tax-ex	empt sta	atus:	X 501(c) (3) ◄ (insert no.) 4947(a)(1) or 527	If "No," attach a list.	(see instructions)						
J	Websi	te: 🕨	. WWW	SBL-SITE.ORG	H(c) Group exemption nur	mber >						
K	Form o	of organi	zation:	X Corporation Trust Association Other ▶ L Year of form	nation: 1980 M State	of legal domicile: GA						
	rt I		nmary		L							
	1			the the organization's mission or most significant activities:	ID VICTON IC							
ø		THE SOCIETY'S MISSION IS TO FOSTER BIBLICAL SCHOLARSHIP. OUR VISION IS										
auc		TO OFFER MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT, INTELLECTUAL										
Governance		GROW	ЛТН <u>,</u> _	AND PROFESSIONAL DEVELOPMENT.								
Š	2	Check	this bo	x 🕨 🔛 if the organization discontinued its operations or disposed of more than 25%	of its net assets.							
დ ფ	3	Numbe	er of vo	ting members of the governing body (Part VI, line 1a)		14						
				lependent voting members of the governing body (Part VI, line 1b)		14						
ij						30						
Activities	1			of all along the Control of Contr		113						
⋖												
		•	•	nrelated business revenue from Part VIII, column (C), line 12		0.						
	b	Net un	related	business taxable income from Form 990-T, line 34		0.						
					Prior Year	Current Year						
ø	8	Contrib	outions	and grants (Part VIII, line 1h)	97,711.	162,915.						
Revenue	9	Progra	ım serv	ice revenue (Part VIII, line 2g)	1,951,767.	1,857,318.						
	10	Investr	ment in	come (Part VIII, column (A), lines 3, 4, and 7d)	20,212.	17,679.						
œ	11	Other	revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	408,414.	456,646.						
	12	Total r	evenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,478,104.	2,494,558.						
				"	7,543.	1,000.						
					0.	0.						
	4=			to or for members (Part IX, column (A), line 4)								
Expenses	15			r compensation, employee benefits (Part IX, column (A), lines 5-10)	1,120,056.	1,064,999.						
ens	16 a			undraising fees (Part IX, column (A), line 11e)	0.	0.						
×	b	Total for	undrais	ing expenses, Part IX, column (D), line 25) 103,092								
	17	Other 6	expens	es (Part IX, column (A), lines 11a-11d, 11f-24f)	1,559,632.	1,299,717.						
	18	Total e	expense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,687,231.	2,365,716.						
	19	Reven	ue less	expenses. Subtract line 18 from line 12	-209,127.	128,842.						
or					Beginning of Year	End of Year						
Net Assets or Fund Balances	20	Total a	issets (Part X, line 16)	3,749,590.	3,989,123.						
Ass Ba	21		,	; (Part X, line 26)	1,341,050.	1,285,629.						
a t	22			fund balances. Subtract line 21 from line 20	2,408,540.	2,703,494.						
	rt II			Block	2,400,540.	2,703,434.						
Гс	וו אוו											
				es of perjury, I declare that I have examined this return, including accompanying schedules is true, correct, and complete. Declaration of preparer (other than officer) is based on all i								
_		and b	Olioi, it	to tack, correct, and complete. Beddenation of property (early than emotify to backet on all t	I	arer has any knowleage.						
	ign											
Н	ere		Signatur	e of officer	Date							
		🚩 :	Type or	print name and title								
			arer's	Date Check i		identifying number						
Paid	l		ture	self- employe	ed (see instruc	otions) 00746804						
Prep	arer's	Firm's name (or yours SMITH & HOWARD, P.C.										
Use	Only	if self-	emplove	dy, 171 17TH STREET, SUITE 900 ATLANTA, GA 30363		04-874-6244						
140:	, the c IT				-							
vıay	tne ih	ks disc	uss this	return with the preparer shown above? (see instructions)		X Yes No						

23-6390716 Page 2 Form 990 (2009)

Pa	art III	Statement of Program Service Accomplishments	
1	Briefly	describe the organization's mission:	
	-	TACHMENT 3	
2	Did th	ne organization undertake any significant program services during the year which were not listed on	
	the pri	ior Form 990 or 990-EZ?	Yes X No
	If "Yes	s," describe these new services on Schedule O.	
3		ne organization cease conducting, or make significant changes in how it conducts, any program	
	service	es?	Yes X No
	If "Yes	s," describe these changes on Schedule O.	
4		ibe the exempt purpose achievements for each of the organization's three largest program services by expe	
		on 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	grants and
	allocat	tions to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code		899,630.
		RESSES - TWO MAJOR ANNUAL CONFERENCES ARE HELD EACH YEAR - ONE	
		HE UNITED STATES AND ONE ABROAD, AS WELL AS REGIONAL MEETINGS	
		H ARE DISCUSSED BELOW. CONFERENCES ARE AN IMPORTANT VENUE FOR	
		ERS AS THEY PROVIDE OPPORTUNITIES FOR INTELLECTUAL AND	
		ESSIONAL DEVELOPMENT, FACILITATING BROAD DISCUSSIONS, AND	
		LE MEMBERS TO COLLABORATE WITH MANY INSTITUTIONS AND	
		NIZATIONS. THEY PROVIDE AN OPPORTUNITY TO REACH A DIVERSE	
		ENCE AND IN MANY CASES RESOURCES ARE DEVELOPED AS A RESULT OF	
	THES	E CONFERENCES.	
4b	(Code:	e:) (Expenses \$ _{858,473.} including grants of \$ _{0.}) (Revenue \$	890 , 975.
		ICATIONS - SBL IS A MEMBER OF THE ASSOCIATION OF AMERICAN	
		ERSITY PRESSES THAT HELPS SET STANDARDS REGARDING PEER	
		EWED PUBLICATIONS. SBL PUBLICATIONS IS INVOLVED IN EVERY	
		E OF PRODUCING BOOKS; ACQUISITION, DEVELOPMENT, PRODUCTION,	
		MARKETING. THIS SUPPORTS PROFESSIONAL DEVELOPMENT,	
		LITATES OPEN DISCUSSION, ENCOURAGES BIBLICAL RESEARCH AND	
		PY, AND IS ADDRESSED TO DIVERSE AUDIENCES WITH A FOCUS ON DEMIA. OVER 133 MEMBERS VOLUNTEER THEIR TIME TO ASSIST IN THIS	
		RAM AREA MAKING IT POSSIBLE FOR OUR PUBLICATIONS PROGRAM TO	
	END .	THE YEAR IN THE BLACK.	
40	(Code	e:) (Expenses \$227,061. including grants of \$1,000.) (Revenue \$	\
40	-	ESSIONS - PROFESSIONS INCLUDE A BROAD RANGE OF ACTIVITIES THAT	29 , 886)
		ORT PROFESSIONAL DEVELOPMENT, FACILITATE OPEN DISCUSSION, AND	
		URAGE THE STUDY OF THE BIBLE. SBL COLLABORATES WITH THE	
		ONAL HUMANITIES ALLIANCE AND AMERICAN COUNCIL OF LEARNED	
		ETIES; ORGANIZATIONS THAT FUNCTION AS A CONSORTIUM FOR	
		NITIES ACTIVITIES. IN ADDITION, SBL HAS ESTABLISHED	
		NERSHIPS WITH CONSORTIA OF COLLEGES, UNIVERSITIES, AND	
		NARIES AS WELL AS WITH INDIVIDUAL HIGHER EDUCATION	
		TITUTIONS.	
	11151	110110N3.	
	Other	program services. (Describe in Schedule O.) ATTACHMENT 4	
÷u		The state of the s	
40		program service expenses \triangleright 2,160,919.	
c	. Juli	F G	Form 990 (2009)
			(=000)

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Χ
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes,"complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X.</i>			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's separate of consolidated inflations statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes,"			
12	complete Schedule D. Parts XI, XII, and XIII.	12	Х	
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No	12	Λ	
127	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	42		X
	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	14a		Λ
D	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	446	v	
45	· ·	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			3.7
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			3.7
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	_		3.7
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Χ

Form **990** (2009)

Part IV **Checklist of Required Schedules** (continued) Did the organization report more than \$5,000 of grants and other assistance to governments and organizations Χ 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the Χ 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated Χ 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25 24a Χ b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Χ with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 25b 990-EZ? If "Yes," complete Schedule L. Part I Χ 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Χ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II, Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? Χ 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV...... b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Χ Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Χ 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Χ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Χ 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38

Form **990** (2009)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 30			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			37
	account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
E o	When the connection is a context, a context of a context of the standard of th	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	0.0		
·	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
- u	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		Х
b	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 was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
h	If "Yes" enter the amount of tax-exempt interest received or accrued during the year			

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

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Χ
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
Ū	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		X
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100		
b	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	100		
• •	form?	11	X	
11 A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•••		
		12a	Х	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	124		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12b	X	
	rise to conflicts?	120		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	X	
	describe in Schedule O how this is done	12c	X	-
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	Λ	
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?		V	
а	The organization's CEO, Executive Director, or top management official	15a	X	V
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			37
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_GA,		. – – –	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	/)		
	available for public inspection. Indicate how you make these available. Check all that apply.			
	X Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: > SUSAN MADARA 825 HOUSTON MILL ROAD SUITE 350 ATLANTA, GA 30329			
	404-727-3103			

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

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

Form **990** (2009)

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Part VII Section A. Officers, Directors, Tru	ustees, Ke	ey En	nplo	oye	es,	and	Hig	hest Compensa	ted Emplo	yees(c	ontinue	d)	
(A) Name and title	(B) Average hours per			heck	_	hat app □ ェ		(D) Reportable compensation	(E) Reporta compensa			(F) timated	
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from rela organizat (W-2/1099-I	ted ions	comp fro orga and	other pensation om the anization related nization	on on ed
1b Total2 Total number of individuals (including but not lim	ited to thos	se liste	ed a				ceiv	86,952. ved more than \$100	,000 in	0.		63,	657.
reportable compensation from the organization	<u> </u>	()									Yes	No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3	163	X
4 For any individual listed on line 1a, is the the organization and related organizations	sum of	report	table	e c	om	pensa	tion	and other comp	pensation f	rom			
individual											4	X	
services rendered to the organization? If "Yes,"											5		Χ
Section B. Independent Contractors Complete this table for your five highest compensation from the organization.	compensate	ed in	dep	end	lent	cont	trac	tors that received	I more tha	ın \$100	0,000	of	
(A) Name and business addr	ress							(B) Description of ser	vices		(C)		
NONE													
2 Total number of independent contractors (in							se I	isted above) who	received				

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art	t VIII	Statement of Revenue			23-6390716		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 514
S.	1a	Federated campaigns	la				
and other similar amounts	b		lb				
a .	С	Fundraising events	Ic				
<u>a</u>	d	Related organizations	ld				
Ē	е	Government grants (contributions)	le				
ē	f	All other contributions, gifts, grants,					
ㅎ			lf 162,915.				
and	g h	Noncash contributions included in lines 1a-1f: Total . Add lines 1a-1f		162,915.			
e n		Total. Add lines 1a-11	Business Code	102,913.			
Program Service Revenue	2a	JOINT ANNUAL MEETING / TRADE SHOW	611600	895,153.			895,15
&	b	MARKETING REVENUE - TRADE SHOWS	541800	115,475.			115,47
<u>i</u>	c	SUBSCRIPTION REVENUE	323100	370,586.	370,586.		
Š	d	MEMBERSHIP DUES	611600	441,720.	441,720.		
Ē	е	MARKETING REVENUE - JOURNAL ADVERISI	NG 541800	34,384.			34,38
g	f	All other program service revenue					
<u>.</u>	g	Total. Add lines 2a-2f	▶	1,857,318.			
	3	Investment income (including dividends, in					
		other similar amounts) ATTACHMET		24,798.			24,79
	4	Income from investment of tax-exempt bon		219.			21
	5	Royalties · · · · · · · · · · · · · · · · · · ·		105,129.			105,12
	6a	Gross Rents					
	b	Less: rental expenses 157,					
	C	Rental income or (loss)					
	d	Net rental income or (loss) (i) Securiti		-53,376.			-53,37
	7a	Gross amount from sales of	0.				
		assets other than inventory	0.				
	b	Less: cost or other basis and sales expenses	7,338.				
	С	Gain or (loss)	-7,338.				
		Net gain or (loss)		-7,338.			-7,33
ه ا	8a	Gross income from fundraising		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Other Revenue	- Ju	events (not including \$					
Š		of contributions reported on line 1c).					
ጅ		See Part IV, line 18	. a				
ا ا	b	Less: direct expenses					
ਰੋ∣	С	Net income or (loss) from fundraising even	ts▶	0.			
	9a	Gross income from gaming activities. See Part IV, line 19					
	b	Less: direct expenses					
	C	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less returns and allowances					
	b	Less: cost of goods sold					
	C	Net income or (loss) from sales of inventor	y ATCH 10►	370,530.	370,530.		
ľ		Miscellaneous Revenue	Business Code	27.27.000.	212,000.		
Ī	11a	JOB OPENINGS PUBLICATION	541900	29,886.			29,88
	b	MISC. REVENUE	900099	4,477.	4,477.	<u> </u>	
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d		34,363.			
- 1	12	Total Revenue. See instructions		2,494,558.	1,187,313.		0. 1,144,33

Part IX Statement of Functional Expenses

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

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

	All other organizations must complete not include amounts reported on lines 6b,		(B)		
	, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	0.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	1 000	4 000		
	U.S. See Part IV, lines 15 and 16	1,000.	1,000.		
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,	450.045	100 000	4.5.45.0	4-004
	trustees, and key employees	153,817.	122,333.	15,650.	15,834.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.	655 000	20.402	24 270
7	Other salaries and wages	722,761.	655,898.	32,493.	34,370.
8	Pension plan contributions (include section 401(k)	E4 070	40 005	2 1 4 1	0 550
_	and section 403(b) employer contributions)	54,978.	49,285.	3,141.	2,552.
9	Other employee benefits	70,064.	54,780.	7,847.	7,437.
10	Payroll taxes	63,379.	57,124.	3,230.	3,025.
11	Fees for services (non-employees):	0			
	Management	0. 3,159.	2,827.	166.	166.
	Legal	40,949.	33,205.	3,799.	3,945.
	Accounting	40,949.	33,203.	3, 199.	3,943.
	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17	0.			
	Investment management fees	138,660.	134,506.	1,833.	2,321.
g	Other	9,414.	9,414.	1,033.	2,321.
12	Advertising and promotion	43,779.	38,526.	2,332.	2,921.
13	Office expenses	97,781.	89,990.	3,039.	4,752.
14	Information technology	37,639.	37,639.	3,039.	4,752.
15	Royalties	42,016.	33,910.	3,904.	4,202.
16	Occupancy	194,597.	167,810.	15,499.	11,288.
17	Travel	194,337.	107,010.	13,433.	11,200.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
40		286,730.	280,971.	2,499.	3,260.
19		0.	200/3/11.	2,133.	3,200.
20	Interest	0.			
21 22	Payments to affiliates Depreciation, depletion, and amortization	18,570.	14,856.	1,857.	1,857.
23		11,508.	9,237.	977.	1,294.
23 24	Insurance Other expenses. Itemize expenses not	11,000.	3/237.	311.	1/231.
24	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
•	DDINIMING	152,185.	152,185.		
	DISTRIBUTION COSTS	72,221.	72,221.		
	OTHER EXPENSES	66,773.	65,241.	1,094.	438.
	DUES AND DISCOUNTS	49,263.	47,128.	788.	1,347.
	COMMUNICATION	34,385.	30,762.	1,548.	2,075.
	All other expenses	88.	71.	9.	8
	Total functional expenses. Add lines 1 through 24f	2,365,716.	2,160,919.	101,705.	103,092.
	Joint Costs. Check here ► If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	2,000,110.	2,100,313.	2027,7001	100,002.
JSA	runuraising sullutatiUII				5 000 (2000)

JSA 9E1052 1.000

Part X Balance Sheet

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

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

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Inspection

Name	of th	ne organizatio	า						Employe	r identificat	ion num	ber	
SOCI	EΤ	Y OF BIBI	LICAL LITERA	ATURE					23-6390716				
Part		Reason fo	or Public Chari	ity Status (All organi	zations m	ust compl	ete this p	oart.) Se	e instruc	tions.			
The o	rgaı	nization is no	t a private founda	ition because it is: (For	lines 1 thro	ough 11, ch	eck only c	ne box.)					
1		A church, co	nvention of churc	ches, or association of	churches d	escribed in	section	n 170(b)(1)(A)(i).				
2		A school des	scribed in sectio	n 170(b)(1)(A)(ii). (At	tach Sched	ule E.)							
3		A hospital or	r a cooperative ho	ospital service organiza	ation descril	bed in se	ction 170	(b)(1)(A)(iii).				
4		A medical	research organiz	cation operated in co	njunction v	with a hos	pital desc	cribed in	section	170(b)(1)((A)(iii).	Enter the	
_		•	ame, city, and sta										
5		An organiza	ition operated fo	or the benefit of a col	lege or un	iversity ow	ned or o	perated	by a gove	ernmental	unit de	scribed in	
_	_	section 170(b)(1)(A)(iv). (Complete Part II.)											
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).												
7		_		ly receives a substan	-	its support	from a q	governme	ental unit	or from t	he gene	eral public	
_				1)(A)(vi). (Complete F									
8				in section 170(b)(1)(
9	Χ	-		ly receives: (1) more							-	_	
		-		ted to its exempt fun		-		-					
			-	nent income and un						511 tax)	from b	usinesses	
	_		•	after June 30, 1975.					•				
10	_	_	-	nd operated exclusively	-		-						
11 [_	_	and operated exclusion	-		-					-	
				ublicly supported orga					-	-		e section	
				at describes the type of								S.11	
. г	\neg	a Typ	_			e III - Func	-	-			pe III - C		
e		-		rtify that the organiz									
				on managers and oth	er than on	e or more	publicly s	supported	i organiza	ations des	scribed	in section	
		()()	section 509(a)(2	,	.: 	h- IDC 4h-	:. :	T	Franci II c				
f		_		a written determinat	1011 110111 1	ine iko ina	at it is a	rype i,	rype II, o	i Type III	support	.ing	
			, check this box		ad any aift	or contribut	ion from a	ny of the				\square	
g		following per		he organization accept	eu any giit i	or contribut	1011 110111 2	illy of the					
				or indirectly controls	aithar al	one or tog	othor witl	n nerson	e describ	ad in (ii)		Yes No	
				rning body of the sup			Cuici with	person	13 4636116	/Ca III (II)	11g(i)	X	
			_	rson described in (i) at	_	iiiiZatioii:					11g(ii)		
		` '	•	of a person described in		hove?					11g(iii)	-	
h			=	tion about the supporte								/	
	me	of supported	(ii) EIN	(iii) Type of organization		. ,	(v) Did v	ou notify	(vi) l	s the	(vii) Ar	mount of	
		nization	(,	(described on lines 1-9	in col. (i) lis	sted in your	the organ	ization in	organizat	ion in col.		port	
				above or IRC section (see instructions)	governing (document?		of your oort?	(i) organiz	zed in the S.?			
				(0000)	Yes	No	Yes	No	Yes	No			
Total													

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

Schedule A (Form 990 or 990-EZ) 2009

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007(d) 2008 (e) 2009 (f) Total Amounts from line 4 7 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 **Total support.** Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage % Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2008 Schedule A, Part II, line 14 % 15 16a 33 1/3 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶ b 33 1/3 % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, 17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2009

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

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

(Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include						
	any "unusual grants.")	100,998.	48,221.	108,963.	97,711.	162,915.	518,808.
2	Gross receipts from admissions, merchandise	,		,	,	,	· · · · · · · · · · · · · · · · · · ·
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	2,016,376.	2,393,725.	2,374,965.	2,348,603.	2,279,036.	11,412,705.
3	Gross receipts from activities that are not an	2,010,376.	2,393,123.	2,374,303.	2,340,003.	2,219,030.	11,412,703.
·	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
4	ŭ						
	benefit and either paid to or expended on						
_	its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	2,117,374.	2,441,946.	2,483,928.	2,446,314.	2,441,951.	11,931,513.
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons	14,060.	11,410.	9,015.	8,765.	11,570.	54,820.
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year				3,103.		3,103.
С	Add lines 7a and 7b	14,060.	11,410.	9,015.	11,868.	11,570.	57,923.
8	Public support (Subtract line 7c from	==, ===		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	==,	,	,
	line 6.)						11,873,590.
Sec	tion B. Total Support						11/0/0/000.
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	2,117,374.	2,441,946.	2,483,928.	2,446,314.	2,441,951.	
	Gross income from interest, dividends,	2,111,374.	2,441,946.	2,483,928.	2,440,314.	2,441,951.	11,931,513.
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	183,168.	268,448.	259,113.	217,088.	234,062.	1,161,879.
D	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	183,168.	268,448.	259,113.	217,088.	234,062.	1,161,879.
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.) ATCH 1	58,491.	77,649.	88,528.	36,249.	34,358.	295,275.
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	2,359,033.	2,788,043.	2,831,569.	2,699,651.	2,710,371.	13,388,667.
14	First five years. If the Form 990 is for						
	organization, check this box and stop here	•			•	•	
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2009 (line 8, co	•		(f))		15	88.68%
16	Public support percentage from 2008 Schedu		•			16	88.71%
	tion D. Computation of Investmen					10	001/1/0
17	Investment income percentage for 2009 (lin			column (f))		17	8.68%
			II line 17				
18	Investment income percentage from 2008					18	8.34 %
19 a	33 1/3 % support tests - 2009. If the or						. \square
_	17 is not more than 33 1/3 %, check the						
b	33 1/3 % support tests - 2008. If the organization						. \square
	line 18 is not more than 331/3 %, check		•	•	. ,		
20	Private foundation. If the organization	did not check a	a box on line	14, 19a, or 19b	, check this box	x and see instru	ctions -

JSA 9E1221 1.000

23-6390716

Page 4

Schedule A (Form 990 or 990-EZ) 2009

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

	a or 17b; or Part III, lir									
SCHEDULE A, PART III - OTHER INCOME										
DESCRIPTION	2005	2006	2007	2008	2009	TOTAL				
OTHER	58,491.	77,649.	88,528.	36,249.	34,358.	295,275.				
TOTAL	58 491	77 649	88 528	36 249	34 358	295 275				

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

2009

Employer identification number

SOCIETY OF BIBLICAL	LITERATURE	23-6390716				
Organization type (check or	ne):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation				
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on				
	501(c)(3) taxable private foundation					
, ,	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule.	pecial Rule. See				
General Rule						
_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or none contributor. Complete Parts I and II.	nore (in money or				
Special Rules						
sections 509(a)(1)	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support te and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	contribution of the greater				
the year, aggregate	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any e contributions of more than \$1,000 for use exclusively for religious, charitabses, or the prevention of cruelty to children or animals. Complete Parts I, II, and	le, scientific, literary, or				
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year						
_	t is not covered by the General Rule and/or the Special Rules does not file Sch	· · · · · · · · · · · · · · · · · · ·				
The state of the s	ust answer "No" on Part IV, line 2 of its Form 990, or check the box on line H o PF, to certify that it does not meet the filing requirements of Schedule B (Form 9)					
For Privacy Act and Paperwork Re	duction Act Notice, see the Instructions Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)				

JSA 9E1251 2.000

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

200

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

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

► Attach to Form 990. ► See separate instructions.

Employer identification number

SOC	CIETY OF BIBLICAL LITERATURE	23-6390716
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds or the organization answered "Yes" to Form 990, Part IV, line 6.	AccountsComplete if
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3		
	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor a	
_		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds car	
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any o	
	purpose conferring impermissible private benefit?	Yes No
Par		m 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or pleasure) Preservation of a	an historically important land area
	Protection of natural habitat	a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the fo	orm of a conservation
	easement on the last day of the tax year.	
		Held at the End of the Year
а	Total number of conservation easements	2a
b		2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by	y the organization during
	the tax year ▶	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling	ı of
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easement	ts during the year
	>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements du	ring the year
	> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	
	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and exp	ense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial state	tements that describes
	the organization's accounting for conservation easements.	
Pai	Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue state art, historical treasures, or other similar assets held for public exhibition, education, or reseated.	tement and balance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or resea provide, in Part XIV, the text of the footnote to its financial statements that describes these item	irch in furtherance of public service,
b	If the organization elected, as permitted under SFAS 116, to report in its revenue stateme	
~	historical treasures, or other similar assets held for public exhibition, education, or research	
	provide the following amounts relating to these items:	
	(i) Revenues included in Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar as	
	following amounts required to be reported under SFAS116 relating to these items:	3, p
а	Revenues included in Form 990, Part VIII, line 1	⊳ \$
b	Assets included in Form 990, Part X	
		· - · · · · -

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

Par	t III Organizations Maintainin	g Collections o	of Art, Hist	orica	Treasure	s, or	Other Similar	Assets(c	ontinued	()
_										
3	Using the organization's acquisition, a		ther records	, chec	k any of the	tollo	wing that are a sig	nificant us	se of its	
	collection items (check all that apply):	•		_						
а	Public exhibition		d			chang	ge programs			
b	Scholarly research		e		Other					
C	Preservation for future gene									
4	Provide a description of the organizat	tion's collections	and explain	now tr	ney further ti	ne or	ganization's exem	ipt purpos	e in	
_	Part XIV.	!:-: 4:	daa#:aa		:-4-u:1 4u					
5	During the year, did the organization							_	¬ _V	
Do	assets to be sold to raise funds rather t IV								Yes	No
Par	IV, line 9, or reported an a					ansv	wered res to r	-om 990), Part	
	TV, line 3, or reported arra	inount on i onn	550, T art	Λ, ππ	, 21.					
1a	Is the organization an agent, trustee,	custo dian or othe	er intermedi:	arv for	contribution	s or	other assets not			
ıa	included on Form 990, Part X?			-				[·	X Yes	No
b	If "Yes," explain the arrangement in F								<u> </u>	140
~		a.c., v and oom	p.5to tilo 1011	J9			Α	mount		
С	Beginning balance					1c	,	inount	2.2	2,067.
d	Additions during the year					1d				7,518.
e	Distributions during the year					1e				3,572.
f	Ending balance					1f				,013.
2a	Did the organization include an amou								Yes	X No
b	If "Yes," explain the arrangement in F	Part XI V.						_		
Par	t V Endowment Funds. Comp	olete if organiza	tion answe	ered "\	es" to For	rm 9	90, Part IV, line	10.		
		(a) Current Year	(b) Prior y	ear	(c) Two year	ars ba	ck (d) Three yea	ars back	(e) Four ye	ears back
1a	Beginning of year balance	406,603.	439	,934.						
b	Contributions	445.	42	711.						
С	Net investment earnings, gains,									
	and losses	54,785.	-76	,042.						
d	Grants or scholarships									
е	Other expenditures for facilities .									
	and programs	100.								
f	Administrative expenses									
g	End of year balance	461,933.		,603.						
2	Provide the estimated percentage of	-		S:						
a	Board designated or quasi-endowme		00 %							
D	Permanent endowment 90.36									
	Term endowment ► 9.6400 %		41		-4 -					
Ja	Are there endowment funds not in the	e pos session or	tne organiza	ation th	at are neid a	and a	administered for th	ie	V	es No
	organization by: (i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	X
b	If "Yes" to 3a(ii), are the related organ								3b	^_
4	Describe in Part XIV the intended use		-							
Par						t X	line 10			
r ar	Description of investment		or other basis		Cost or other		(c) Accumulated	(d	l) Book value	
	Description of investment		estment)		basis (other)		depreciation	(u) BOOK Value	7
1a	Land									
b	Buildings									
C	Leasehold improvements									
d	Equipment				119,61	13.	91,056		28	3,557.
е	Other				· · · · · · · · · · · · · · · · · · ·		·			
Tota	I. Add lines 1a through 1e. (Column (m 990, Part	X, col	umn (B), line	= 10(c).) >		28	3,557.

Schedule D (Form 990) 2009

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

Part VII	Investments - Other Securities. See F	orm 990, Part X, lin	ne 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
Financial d	erivatives			
Closely-hel	d equity interests			
			+	
			+	
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII			ne 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuation	1:
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Cost or end-of-year market	
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, li	ne 15.		
		Description		(b) Book value
	NTER FIXED ASSETS			1,573,800.
LUCE CE	NTER ENDOWMENT FUND			417,383
Total (Calum	(h) must assist Farm 000 Part V and (D) line 45			1 001 102
Part X	n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. See Form 990, Part X	lino 25		1,991,183.
	(a) Description of liability	(b) Amount		
1. Federal inc		(b) Amount	-	
rederaring	one taxes		_	
			_	
			-	
			_	
Total (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.)			
Total. (Column	in (b) must equal Form 990, Fall A, Col. (b) line 20.)			

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

23-6390716 Schedule D (Form 990) 2009 Page 4

Ochicadi	C D (1 0111 000) 2000	25	3330710			1 agc 4
Part		ted Fi	nancial Staten	nents	<u>\$</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		2,494,558.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	↓	2,365,716.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		128,842.
4	Net unrealized gains (losses) on investments			4		166,112.
5	Donated services and use of facilities			5		
6	Investment expenses			6		
7	Prior period adjustments			7		
8	Other (Describe in Part XIV.)			8		
9	Total adjustments (net). Add lines 4 through 8			9		166,112.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3	and 9		10		294,954.
Part	XII Reconciliation of Revenue per Audited Financial Statements W	ith R	evenue per Re	turn		
1	Total revenue, gains, and other support per audited financial statements			📙	1	2,769,512.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	i	ı			
а	Net unrealized gains on investments	2a	166,11			
b	Donated services and use of facilities	2b	6.	53.		
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV.)	2d	108,18			
е	Add lines 2a through 2d				2e	274,954.
3	Subtract line 2e from line 1				3	2,494,558.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b			L	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	2,494,558.
Part	XIII Reconciliation of Expenses per Audited Financial Statements V	Nith E	Expenses per l	Retu	rn	
1	Total expenses and losses per audited financial statements			L	1	2,474,558.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	6.	53.		
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d	108,18	39.		
е	Add lines 2a through 2d			L	2e	108,842.
3	Subtract line 2e from line 1			L	3	2,365,716.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b			L	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		<u> </u>		5	2,365,716.
Part	XIV Supplemental Information					
Compl	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I	III. line	s 1a and 4: Part	IV. lin	ies 1b)
	r; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XI					
this pa	rt to provide any additional information.					
SEE	PAGE 5					

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

Part XIV Supplemental Information (continued)

SCHEDULE D, PART V, QUESTION 4

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

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

SCHEDULE D, PART XII, QUESTION 2D

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

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

SCHEDULE D, PART XIII, QUESTION 2D

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

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

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

Part XIV Supplemental Information (continued)

SCHEDULE D, PART IV, QUESTION 1B

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

FIN 48 FOOTNOTE

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

THE SOCIETY ANNUALLY EVALUATES ALL FEDERAL AND STATE INCOME TAX

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

POSITIONS THE SOCIETY TAKES MEET THE DEFINITION OF AN UNCERTAIN TAX

POSITION UNDER THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING

STANDARDS CODIFICATION.

Schedule D (Form 990) 2009

Schedule F (Form 990)

Part I

Statement of Activities Outside the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection Employer identification number

Name of the organization

► Attach to Form 990. ► See separate instructions.

SOCIETY OF BIBLICAL LITERATURE 23-6390716 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes									
2	For grantmakers. Descri United States.	be in Part IV th	e organization'	's procedures for monitor	ing the use of grant fund	s outside the				
3	Activities per Region. (Use	e Schedule F-1	(Form 990) if a	dditional space is needed.)					
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region				
EURC	OPE	0	0	PROGRAM SERVICES	CONFERENCE	12,447.				
EASI	r ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	CONFERENCE	19,672.				

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

Schedule F (Form 990) 2009

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

(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 non-cash assistance	(h) Description of non-cash assistance	(i) Method (valuation (book, FM) appraisal
								other)
			arities by the foreig					1
	(a) Name of organization	(a) Name of organization (b) IRS code section and EIN (if applicable)	(a) Name of organization (b) IRS code section and EIN (ff applicable) (c) Region (c) Region	(a) Name of organization (b) IRS and EIN section and EIN (if applicable) (c) Region (d) Purpose of grant	(a) Name of organization (b) IRS odels section and Else (c) Region (c) Region (d) Purpose of grant (e) Amount of cash grant (e) Amount of cash grant	(a) Name of organization (b) IRS code section and EIN (c) Region (c) Region (d) Purpose of grant (e) Amount of cash grant (f) Manner of cash grant (d) Start of cash grant (d) Amount of cash grant (e) Amount of cash grant (e) Region (f) Amount of cash grant (g) Amount	(a) Name of organization (b) Name of organization (c) Region (d) Purpose of grant (e) Amount of cash grant (f) Manner of inch-cash solutioned inch-cash grant (h) Manner of cash grant (h) Manner of grant of gran	(a) Name of organization (b) Next code (c) Region (d) Purpose of grant (e) Amount of cash grant (f) Memor of dabunsement (g) Amount of cash grant (h) Description (n) Secretary (n) Secretary (n) Memor of dabunsement (g) Amount of cash grant (g) Amount of cash grant (h) Secretary (n) Secretary (n) Memor of dabunsement (n) Memor of dabunseme

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

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

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

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009 23-63 90 71 6 Page **4**

Part IV Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.	
SCHEDULE F, PART I, QUESTION 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 MEETING OR BY PURCHASING A TICKET ON THEIR BEHALF	
TO COME TO THE MEETING.	

SCHEDULE J (Form 990)

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

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 **Open to Public** Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number SOCIETY OF BIBLICAL LITERATURE 23-6390716 **Questions Regarding Compensation** Voc. No.

			162	NO
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
h	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
_	explain	1b	X	
2				3.7
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		X
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	• • • • • • • • • • • • • • • • • • • •	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) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the revenues of:	-		v
a	The organization?	5a 5b		X
b	Any related organization? If "Yes" to line 5a or 5b, describe in Part III.	อม		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the net earnings of:			
а	The organization?	6a		Χ
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2009

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

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

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

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

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

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No. 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

Employer identification number 23-6390716

ATTACHMENT 2

FORM 990, PART III, QUESTION 4D

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

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

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

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

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

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

Schedule O (Form 990) 2009 Page 2

Name of the organization SOCIETY OF BIBLICAL LITERATURE

Employer identification number

23-6390716

ATTACHMENT 2 (CONT'D)

WORKED WITH THE TECHNOLOGY DEPARTMENT TO CONTINUALLY CREATE BETTER

ENVIRONMENTS FOR PROGRAM UNIT CHAIRS TO UTILIZE AND FOR MEMBER

REGISTRATION AND ONLINE SERVICES. AN ORGANIZATION MUST EITHER OUTSOURCE

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

DEPARTMENT.

FORM 990, PART VI, SECTION B, QUESTION 11

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

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

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

IS REVIEWED FOR CONFLICTS.

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

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

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

Schedule O (Form 990) 2009 Page 2

Name of the organization SOCIETY OF BIBLICAL LITERATURE

Employer identification number

23-6390716

ATTACHMENT 2 (CONT'D)

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

COMPENSATION. EXECUTIVE DIRECTOR COMPENSATION POLICY IS ADMINISTERED BY

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

ESTABLISHING AND MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR THE

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

REVIEW THE COMPENSATION PROGRAM AND MAKE RECOMMENDATIONS FOR ANY CHANGES

TO COUNCIL AS APPROPRIATE. THE COMMITTEE REVIEWS AND APPROVES BASE

SALARIES AND ANNUAL INCENTIVE OPPORTUNITY ADJUSTMENTS, AND OBJECTIVES AND

GOALS FOR THE UPCOMING YEAR'S ANNUAL INCENTIVE PLAN.

FORM 990, PART VI, SECTION C, QUESTION 19

THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY

ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FINANCIAL STATEMENTS ARE

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

UPON REQUEST.

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

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

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

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

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

ATTACHMENT 3

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

BEHALF OF THE ORGANIZATION.

THE OBJECT OF THE SOCIETY SHALL BE TO STIMULATE THE CRITICAL

Schedule O (Form 990) 2009

Schedule O (Form 990) 2009 Page 2

Name of the organization SOCIETY OF BIBLICAL LITERATURE

Employer identification number 23-6390716

ATTACHMENT 3 (CONT'D)

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

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

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

COMPREHENSIVE STATEMENT THAT ENCOMPASSES THE SOCIETY'S ASPIRATIONS.

OUR VISION IS TO OFFER MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT,

INTELLECTUAL GROWTH, AND PROFESSIONAL DEVELOPMENT.

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

MISSION STATEMENT:

FOSTER BIBLICAL SCHOLARSHIP

STRATEGIC VISION STATEMENTS:

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

Schedule O (Form 990) 2009

Schedule O (Form 990) 2009 Page 2

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

ATTACHMENT 3 (CONT'D)

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

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

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

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

Schedule O (Form 990) 2009 Page 2

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

ATTACHMENT

Schedule O (Form 990) 2009 Page 2

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

Employer identification number

23-6390716

ATTACHMENT 9 (CONT'D)

FORM 990, PART X - DEFERRED REVENUE

DESCRIPTION ENDING
BOOK VALUE

DEFERRED REVENUE 1,070,381.

TOTALS ______1,070,381.

RENT AND ROYALTY INCOME

Taxpayer's Name							1	-	ing Number
SOCIETY OF BIBL	ICAL LITERA	TURE					2	<u>3-63</u>	90716
DESCRIPTION OF PROPERTY									
RENTAL BUILDING Yes No Did you	actively participate in th	tion -	of the east	الم يقانية	uring the tax year?				
REAL RENTAL INC		e operation c							
OTHER INCOME	OME		- •			• • •		\dashv	
RENTAL BUILDING						104	,135		
						104	, 100	<u> </u>	
TOTAL GROSS INCOME								_	104,135.
OTHER EXPENSES:									
SEE ATTACHMENT									
								_	
								_	
								-	
DEPRECIATION (SHOWN BELO	w)				57,0	0.6			
LESS: Beneficiary's Portion	•••,			• • •	- 31 , 0	00.			
AMORTIZATION									
LESS: Beneficiary's Portion									
DEPLETION									
LESS: Beneficiary's Portion									
TOTAL EXPENSES									157 , 511.
TOTAL RENT OR ROYALTY INC	OME (LOSS)								<u>-53,376.</u>
Less Amount to									
Rent or Royalty									
Depreciation						·		_	
Depletion								_	
Investment Interest Expense								_	
Other Expenses Net Income (Loss) to Others									
Net Rent or Royalty Income (Los									-53,376.
Deductible Rental Loss (if Appli									<u> </u>
SCHEDULE FOR DEPRE									
(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des.	(e) Bus. %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(i) Life or rate	(j) Depreciation for this year
SEE ATTACHMENT									
JSA Totals	•								

100,505.

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

OTHER INCOME

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

RENT AND ROYALTY SUMMARY

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

23-6390716 SOCIETY OF BIBLICAL LITERATURE

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

ATTACHMENT 10

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

ATTACHMENT 10

4797

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

Department of the Treasury

► Attach to your tax return.

See separate instructions.

Attachment Sequence No.

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

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2009)

23-6390716 Form 4797 (2009) Page 2

Pa	Gain From Disposition of Property (see instructions)	Un	der Sections 124	5, 1250, 1252, 1	254	, and 1255		- 9 -
19	(a) Description of section 1245, 1250, 1252, 1254, or 125	55 pi	operty:			(b) Date acquired (mo., day, yr.)	(c) Date solo (mo., day, yr	a'
		-	. ,			(mo., day, yr.)	(IIIO., day, yi	-)
	,							
_	These columns relate to the properties on lines 19A through 19D.	>	Property A	Property B		Property C	Property I	D
20		20						
21		21						
22	Depreciation (or depletion) allowed or allowable2	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:							
	a Depreciation allowed or allowable from line 22	25a						
	b Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
	a Additional depreciation after 1975 (see instructions)	26a						
	b Applicable percentage multiplied by the smaller of							
	line 24 or line 26a (see instructions)	26b						
	c Subtract line 26a from line 24. If residential rental property							
	or line 24 is not more than line 26a, skip lines 26d and 26e	26c						
	d Additional depreciation after 1969 and before 1976	26d						
	e Enter the smaller of line 26c or 26d	26e						
	f Section 291 amount (corporations only)	26f						
		26g						
27	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).							
	a Soil, water, and land clearing expenses	?7a						
	b Line 27a multiplied by applicable percentage (see instructions)	?7b						
	c Enter the smaller of line 24 or 27b	?7с						
28	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining	!8a						
	b Enter the smaller of line 24 or 28a	8b						
29	If section 1255 property:							
	Applicable percentage of payments excluded from							
	income under section 126 (see instructions)	9a						
	· · · · · · · · · · · · · · · · · · ·	9b						
Su	ummary of Part III Gains. Complete property of	colu	ımns A through D	through line 29	b b	efore going to lin	ne 30.	
30	Total gains for all properties. Add property columns A thro	ona	h D line 24			30	,	
31	Add property columns A through D, lines 25b, 26g, 27c, 2	•		nd on line 13		31		
32					ortio	· · · · · · · · · 		
32	•	•		•			,	
Pa	art IV Recapture Amounts Under Sections (see instructions)							
	· · · · · · · · · · · · · · · · · · ·					(a) Section	(b) Section	1
						179	280F(b)(2)	
33	Section 179 expense deduction or depreciation allowable	e in e	orior vears	F:	33			
34	·				34			
35		ins	tructions for where to r		35			
	. 1000ptaro amount outrate into of nom into oo. Ooc the		a a a a a a a a a a a a a a a a a a a	-p-11	JJ		Form 4797	(2000)

	Date	Date	Gross Sales	Depreciation Allowed	Cost or Other	Gain or (Loss)
Description	Acquired	Sold	Price	or Allowable	Basis	for entire year
COMPUTERS	VAR	06/30/2010	0.	10,383.	10,897.	-514.
AIR CONDITIONER FLUE	02/01/2009	Sold 06/30/2010 06/30/2010	0.	or Allowable 10,383. 352.	10,897. 7,176.	for entire year -514. -6,824.
					•	•
Totals						-7 , 338.

	990-T	Exemp	ot Organization B	usiness Ir	come	e Tax Return(a	nd proxy	tax under section	6033(e))	OMB		
	nent of the Treasury		For calendar year 2009	or other tax ye	ar begir	nning	07	$\underline{/01}$, 2009, and	Į [2	≟ ⋓⋃ ᠑	
	Revenue Service			5/30, 20 10				nstructions.		Open to for 501(c)(3	Public Inspection Organizations Only	
, L	Check box if		Name of organization (Check bo	x if nam	e changed and see i	nstruction	s.)		-	fication number	
	address changed								on page		nstructions for Block D	
	npt under section	5	SOCIETY OF E									
X	501(C)(3)	Print or	Number, street, and roo	m or suite no. If	a P.O. I	oox, see page 8 of in	structions			23-6390716 E Unrelated business activity codes		
<u> </u>	408(e) 220(e)	Туре				_		0.50	1		ess activity code Block E on page 9.)	
L 2	408A530(a)		825 HOUSTON		AD NE	<u> </u>		350	_ (555	.0	Diodit E on page on	
	529(a)		City or town, state, and									
	k value of all assets		ATLANTA, GA			D						
	F		up exemption number						—			
	•		ck organization type			ooration	501(0	c) trust	401(a)	trust	Other trus	
			mary unrelated busine									
			orporation a subsidiary				diary cor	ntrolled group?		▶∟	Yes _X_ N	
			entifying number of the	e parent corpo	oration.				101 70'	7 2102		
			SUSAN MADARA					ne number 🕨 4		7-3103 T	(C) No4	
Part			or Business Inc	ome		(A) Incom	e	(B) Expe	nses		(C) Net	
	Gross receipts or sa			-								
	Less returns and allowance			c Balance ▶								
		•	ıle A, line 7)		2							
			from line 1c		3							
			ach Schedule D)		4a							
			rt II, line 17) (attach Form		4b							
			usts		4c							
		-	and S corporations (atta		5 6							
			come (Schedule E)		7							
			ies, and rents from									
		-	ies, and rents non		8							
			section 501(c)(7),		-							
					9							
			come (Schedule I)		10							
			ule J)		11							
			of the instructions; attach		12							
	, ,	-	ugh 12		13							
Part			Taken Elsewher			of the instructi	ons for	limitations o	n deduc	tions.)		
			ibutions, deduction	`						,	e.)	
14												
-			irectors, and trustees	(Schedule K)					14			
			irectors, and trustees									
5	Salaries and wages								15			
5 6	Salaries and wages Repairs and mainter	nance							15 16			
5 6 7	Salaries and wages Repairs and mainter Bad debts	nance			 				15 16 17			
5 6 7 8	Salaries and wages Repairs and mainter Bad debts Interest (attach sche	nance edule)			 				15 16 17 18			
5 6 7 8 9	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses	nance edule)							15 16 17 18 19			
5 6 7 8 9	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi	nance edule) ions (Se	ee page 13 of the instru	uctions for limi	itation r	ules.)			15 16 17 18 19			
5 6 7 8 9 0	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach	nance edule) ions (Se n Form 4	ee page 13 of the instru	uctions for limi	itation r	rules.)			15 16 17 18 19 20			
5 6 7 8 9 0 1	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation cl	nance edule) ions (Se n Form 4	ee page 13 of the instru 1562)	uctions for limi	itation r	ules.)			15 16 17 18 19 20 0.			
5 6 7 8 9 0 1 2 3	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation of Depletion	nance edule) ions (Se n Form 4 laimed c	ee page 13 of the instru 1562) on Schedule A and else	uctions for limi	itation r	ules.)	1 a		15 16 17 18 19 20 0.			
5 6 7 8 9 0 1 2 3	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation cl Depletion Contributions to defe	nance edule) ions (Se n Form 4 laimed c	ee page 13 of the instru 4562) on Schedule A and else ompensation plans	uctions for limi	itation r	ules.)	1 a		15 16 17 18 19 20 0. 22b 23			
5 6 7 8 9 0 1 2 3 4 5	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation cl Depletion Contributions to defe Employee benefit pr	nance edule) ions (Se n Form 4 laimed co	ee page 13 of the instru 4562) on Schedule A and elso ompensation plans	uctions for limi	itation r	ules.)	1 a		15 16 17 18 19 20 0. 22b 23 24			
5 6 7 8 9 0 1 1 2 3 4 5 6	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation cl Depletion Contributions to defe Employee benefit pr Excess exempt expe	nance edule) ions (Se i Form 4 laimed co erred co rograms enses (\$	ee page 13 of the instru 1562) on Schedule A and elso ompensation plans Schedule I)	uctions for limi	itation r	ules.)	1 a		15 16 17 18 19 20 0. 22b 23 24 25			
5 6 7 8 9 0 1 2 3 4 5 6 7	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation cl Depletion Contributions to defe Employee benefit pr Excess exempt expe Excess readership of	nance edule) ions (Se i Form 4 laimed c erred co rograms enses (Scosts (Sc	ee page 13 of the instru 1562) on Schedule A and else ompensation plans Schedule I) chedule J)	uctions for limi	itation r	rules.)	a		15 16 17 18 19 20 0. 22b 23 24 25 26			
5 6 7 8 9 0 1 2 3 4 5 6 7 8	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation cl Depletion Contributions to defe Employee benefit pr Excess exempt expe Excess readership co Other deductions (a	nance edule) ions (Se n Form 4 laimed c erred co rograms enses (Se costs (Se ttach se	ee page 13 of the instruction of	uctions for limi	itation r	ules.)	1 a		15 16 17 18 19 20 0. 22b 23 24 25 26 27			
5 6 7 8 9 0 1 2 3 4 4 5 6 6 7 8 9	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation cl Depletion Contributions to defe Employee benefit pr Excess exempt exp Excess readership of Other deductions. A	nance edule) ions (Se n Form 4 laimed c erred co rograms enses (Se costs (Se ttach sc	ee page 13 of the instruction of	uctions for limi	itation r	ules.)	1 a		15 16 17 18 19 20 0. 22b 23 24 25 26 27 28 29			
5 6 7 8 9 0 1 1 2 3 4 5 6 6 7 8 9 9 0	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation cl Depletion Contributions to defe Employee benefit pr Excess exempt expe Excess readership of Other deductions (a Total deductions. A Unrelated business	nance edule) ions (Se n Form 4 laimed co rograms enses (Se costs (Se ttach se Add lines taxable	ee page 13 of the instruction of	ewhere on ret	itation r urn	ules.)	a from line	± 13	15 16 17 18 19 20 0. 22b 23 24 25 26 27 28 29 30			
5 6 6 7 8 8 9 9 00 01 1 22 2 33 24 4 5 5 6 6 27 8 8 9 9 00 01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation of Depletion Contributions to defe Employee benefit pr Excess exempt expe Excess readership of Other deductions (a Total deductions. A Unrelated business Net operating loss of	nance edule) ions (Se in Form 4 daimed co rograms enses (Se costs (Si ttach se Add lines taxable	ee page 13 of the instructs for Schedule A and else ompensation plans is Schedule I) chedule J) chedule J) chedule) is 14 through 28 income before net open (limited to the amount	ewhere on ret	itation r urn	rules.)	a from line	± 13	15 16 17 18 19 20 0. 22b 23 24 25 26 27 28 29 30			
15 16 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation of Depletion Contributions to defe Employee benefit pr Excess exempt expe Excess readership of Other deductions (a Total deductions. A Unrelated business Net operating loss of Unrelated business	nance edule) ions (Se in Form 4 daimed co rograms enses (Se ttach se Add lines taxable leduction taxable	pee page 13 of the instruction o	ewhere on ret erating loss dent on line 30) c deduction. S	urn	n. Subtract line 29	from line		15 16 17 18 19 20 0. 22b 23 24 25 26 27 28 29 30 31 32			
15 16 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	Salaries and wages Repairs and mainter Bad debts Interest (attach sche Taxes and licenses Charitable contributi Depreciation (attach Less depreciation of Depletion Contributions to defe Employee benefit pr Excess exempt expe Excess readership of Other deductions (a Total deductions. A Unrelated business Net operating loss of Unrelated business Specific deduction (a	nance edule) ions (Se in Form 4 daimed co rograms enses (Sosts (So ttach sc Add lines taxable leduction taxable General	ee page 13 of the instructs for Schedule A and else ompensation plans is Schedule I) chedule J) chedule J) chedule) is 14 through 28 income before net open (limited to the amount	ewhere on ret erating loss de nt on line 30) c deduction. S	urn	n. Subtract line 29	a a from line	13	15 16 17 18 19 20 0. 22b 23 24 25 26 27 28 29 30 31 32 33			

Part	T T	Fax Computation		
35	Organizat	tions Taxable as Corporations. See instructions for tax compu	tation on page 15.	
	Controlled	d group members (sections 1561 and 1563) check here 🕒 🔲 See instructions	and:	
а	1	ur share of the \$50,000, \$25,000, and \$9,925,000 taxable income brac	kets (in that order):	
	(1) \$	(2) \$ (3) \$		
b	Enter orga	anization's share of: (1) Additional 5% tax (not more than \$11,750)	\$	
	(2) Addition	onal 3% tax (not more than \$100,000)	\$	
		ax on the amount on line 34		0.
36		Faxable at Trust Rates. See instructions for tax computation on pag		
		nt on line 34 from: Tax rate schedule or Schedule D (Form 1041)		
37		c. See page 16 of the instructions		
38		e minimum tax		0.
39 Pari		d lines 37 and 38 to line 35c or 36, whichever applies Tax and Payments		0.
			.	
	ū	ax credit (corporations attach Form 1118; trusts attach Form 1116) 40s dits (see page 16 of the instructions) 40s		
		prior year minimum tax (attach Form 8801 or 8827) 40c 40c		
41		dits. Add lines 40a through 40d ine 40e from line 39		0.
42		s. Check if from: Form 4255 Form 8611 Form 8697 Form 8866		•
43		Add lines 41 and 42	_	0.
		s: A 2008 overpayment credited to 2009		
		mated tax payments 44th		
c		sited with Form 8868		
	•	rganizations: Tax paid or withheld at source (see instructions)		
	_	vithholding (see instructions) 446		
		dits and payments: Form 2439		
		rm 4136 Other Total ▶		
45	Total payı	ments. Add lines 44a through 44f	45	
46	Estimated	d tax penalty (see page 4 of the instructions). Check if Form 2220 is attached	▶	
47				0.
48	Overpayn	ment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid		0.
49		amount of line 48 you want: Credited to 2010 estimated tax	Refunded ► 49	0.
Part	V S	Statements Regarding Certain Activities and Other Inform	nation (see instructions on pag	ge 17)
1		ne during the 2009 calendar year, did the organization have an interest in or a		
		bank, securities, or other) in a foreign country? If YES, the organization may have to	to file Form TD F 90-22.1, Report o	-
				X
2		e tax year, did the organization receive a distribution from, or was it the grantor	of, or transferor to, a foreign trust	? X
		e page 5 of the instructions for other forms the organization may have to file.		
3		amount of tax-exempt interest received or accrued during the tax year		
		A - Cost of Goods Sold. Enter method of inventory valuation		
1	•		of year 6	
2			s sold. Subtract line	
3			5. Enter here and in	
4 a			of section 263A (with res	pect to Yes No
b		/ · · · · · · · · · · · · · · · · · · ·	iced or acquired for resale	
5		, (ansar of the first of the fi	on?	
<u> </u>		penalties of perjury, I declare that I have examined this return, including accompanying schedules are	nd statements, and to the best of my know	wledge and belief, it is true,
Sigr	correct a	and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer ha	s any knowledge.	
Here				S discuss this return with r shown below (see
		ure of officer Date Title	instructions	
_		Preparer's Date		er's SSN or PTIN
Paid		signature	Check if self-employed	00746804
	arer's	Firm's name (or SMITH & HOWARD, P.C.	EIN 58-12504	
use	Only	yours if self-employed), address, and ZIP code 171 17TH STREET, SUITE 900	Phone no. 404-874-62	
		ATLANTA, GA 30363		Form 990-T (2009)

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

Schedule C - Rent Income (see instructions on page 18		perty a	and Personal Prop	erty	Leased W	ith Real Prop	erty)		
Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent received	or accrue	ed						
(a) From personal property (if the personal property is more than more than 50%)	ercentage of rent n 10% but not	percenta	from real and personal prop age of rent for personal prop if the rent is based on profi	erty e	xceeds	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)			
(1)									
(2)									
(3)									
(4)									
Total	Т	otal							
(c) Total income. Add totals of cohere and on page 1, Part I, line 6,	. , . , ,					(b) Total deduct Enter here and or Part I, line 6, colu	n page 1,	•	
Schedule E - Unrelated Do	ebt-Financed Inc	ome(se	ee instructions on pag	e 19)				
Description of debt-financed property			2. Gross income from allocable to debt-finance			ctions directly conne debt-finance	d property		
·			property	(a) Straight (attach	line depreciation schedule)	(b) Other deductions (attach schedule)			
(1)									
(2)									
(3)									
(4)									
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted of or allocable to debt-financed prop (attach schedule	o erty	6. Column 4 divided by column 5			ome reportable x column 6)		Allocable deductions in 6 x total of columns 3(a) and 3(b))	
<u>(1)</u>				%					
(2)				%					
(3)				%					
(4)				%					
Totals Total dividends-received deducti				▶	Part I, line 7,	. ,		here and on page 1, line 7, column (B).	
Schedule F - Interest, Ann			Ponte From Contro	llod.	Organiza	tions(soo instru	otione o	2 200 201	
Schedule F - Interest, Am	Tuities, Royalties		xempt Controlled Org			tions see msuu	CHOIS O	i page 20)	
Name of controlled organization	2. Employer identification number		Net unrelated income (loss) (see instructions)	4. To	otal of specified yments made	5. Part of column included in the coorganization's gro	ontrolling	6. Deductions directly connected with income in column 5	
(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Organiz	zations								
7. Taxable Income	8. Net unrelated ind (loss) (see instruct		9. Total of specified payments made	d	include	t of column 9 that is d in the controlling ation's gross income	со	Deductions directly nnected with income in column 10	
(1)					3	5 : : :			
(2)									
(3)									
(4)									
Totals				_	Enter here	ns 5 and 10. and on page 1, 8, column (A).	Enter	columns 6 and 11. here and on page 1, , line 8, column (B).	

Schedule G -Investment II	ncome of a Sec	tion 501(c)(7), (9), or (17) Organi	zatio	n (see inst	ructi	ons on pag	e 20)	
1. Description of income	2. Amount of			3. Deductions directly connected (attach schedule)		4. Se (attach	t-asic	les	5. Total deduction and set-asides plus col. 4	(col. 3
(1)				,					•	
(2)										
(3)										
(4)										
	Enter here and Part I, line 9, co								Enter here and or Part I, line 9, colu	
Totals ▶	•									
Schedule I - Exploited Exe	empt Activity Inc	come, Othe	r Tha	an Advertising In	com	ne (see instruc	ction	s on page	21)	
Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expense directly connected w production unrelated business incomparison.	d with business (column on of 2 minus column ted 3). If a gain,		5. Gross income from activity that is not unrelated business income		6. Expenses attributable to column 5		7. Excess e expensi (column 6 n column 5, b more the column 4	es ninus ut not an
<u>(1)</u>										
(2)										
(3)										
(4)										
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here an page 1, Par line 10, col. (t I,						Enter here on page Part II, line	1,
Totals Schedule J - Advertising I	ncoma (see instri	ictions on na	ne 21	1						
Part I Income From Pe										
ratti ilicome From Pe	Tiouicais Repoi	teu on a Co	טפווע	lluateu Dasis						
1. Name of periodical	2. Gross advertising income	3. Direct advertising co		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	income		6. Readership costs		7. Excess reacosts (columinus column not more to column	mn 6 n 5, but than
(1)										
(2)				-						
(3)				-						
(4)				-						
(-)										
Totals (carry to Part II, line (5))	•									
Part II Income From Pethrough 7 on a lin	eriodicals Repor ne-by-line basis.)	ted on a S	epar	ate Basis (For ea	ach p	periodical lis	sted	in Part I	, fill in colu	nns 2
1. Name of periodical	2. Gross advertising income	3. Direct advertising co		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5.	. Circulation income	6	i. Readership costs	7. Excess rea costs (colum minus column not more to	mn 6 n 5, but than
(1)										
(2)										
(3)										
(4)										
(5) Totals from Part I	Enter here and on page 1, Part I, line 11, col. (A).	Enter here an page 1, Pai line 11, col. (rt I						Enter here on page Part II, line	1,
Totals, Part II (lines 1-5) ► Schedule K - Compensation		Nirootoro -	nd T	vuoto oo (caa inatee)	otic :-	on no== 04\				
•	on or Officers, L	Directors, a	na n	,	Ctions	3. Percent of		4 Compe	nsation attributab	le to
1. Name				2. Title		time devoted to business			elated business	
							%			
					\perp		%			
					_		%			
							%			
Total. Enter here and on page 1, P	art II, line 14			<u> </u>			<u>. </u>			

Form **990-T** (2009)

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

SIGNATURE...

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

FILING...

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

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



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

Georgia Form 600-T (Rev. 1/10)	Ш	HII					
Exempt Organization	Ш						
Inrelated Business Income Tax Return			1	L 0 0	160	14	14

Change of Address					
Exempt Organization Unr		s Income Tax	Return		20 0 9
(Under Georgia Code Section 48-7-2	25)				
For the taxable year beginning	07/01	, 20 <u>0 9</u>	and ending	06/30	, 20 <u>1 0</u>
Name of Organization					D No. (in case of employees'
SOCIETY OF BIBLICAL LIT	'ERATURE				ction 401 (a) and exempt under rt the trust's identification
Number and Street				number.)	
825 HOUSTON MILL ROAD N	E			23-6390	
City or Town, State and Zip Code				Date of current exemunder which you are	nption letter and IRS code section exempt.
ATLANTA, GA 30329 Name and Address of Trust's Fiducia	- m. /			, , , , , , , , , , , , , , , , , , , ,	·
Name and Address of Trust's Fiducia	ary			0.4	SEC.501 (C)(3
				50	CHEDULE 1
Unrelated business taxable incom	me from Federal Form	m 990-T (attach cop	y)		0.
2. Additions					
3. Total (add line 1 and line 2)					0.
4. Subtractions					
5. Georgia unrelated business taxa				0.4	0.
COMPUTATION OF GEORGIA	UNRELATED BUS	SINESS INCOME	IAX	S	CHEDULE 2
1. Line 5, above, multiplied by 6%					0.
2. Less: Credits and Payments					
3. Withholding Credits (G2-A and/o	r G-2RP)				
4. Balance of tax due OR overpayn	nent				0.
5. Interest due (see instructions)					
6. Penalties due (see instructions)					
7. Balance of tax, interest and pena	alties due with return				0.
8. If line 4 is an overpayment, amou	unt is to be credited o	on 20 <u>1 0</u>			
Estimated Tax ▶		Refunded ▶	0.		
A COPY OF THE FEDERAL 990-T AI DECLARATION: I/We declare, u schedules and statements) and t person other than a taxpayer, his Signature of Officer	nder penalty of per to the best of our k	rjury that I/we hav nowledge and be based on all info S	ve examined this lief it is true, cor	return (includir rect and comple s/he has any k	ng accompanying ete. If prepared by a cnowledge.
Title	Date		nployee ID or Social	Security Number	

	990-T	Exemp	ot Organization I	3usiness II	ncom	e Tax Return(an	d proxv	tax under section	1 6033(e))	OWB No	. 1545-0687
			For calendar year 2009							2() 19
	ent of the Treasury Revenue Service			6/30,20 1		► See se			·	Open to Pu	ublic Inspection Organizations Only
	Check box if		Name of organization (ne changed and see in	structions	s.)	D Empl		ation number
• —	address changed								(Employ on page	/ees' trust, see instrue 9.)	ictions for Block D
Exer	npt under section		SOCIETY OF	BIBLICAL	LIT	ERATURE				,	
X	501(C)(3)	Print	Number, street, and ro	om or suite no. I	f a P.O.	box, see page 8 of ins	tructions.		23-6	390716	
<u> </u>	408(e) 220(e)	or Type									s activity code
<u> </u>	408A 530(a)	lybe	825 HOUSTON	MILL RO	AD N	E		350	(See in	nstructions for Blo	ock E on page 9.)
	529(a)		City or town, state, and	ZIP code							
Bool	value of all assets		ATLANTA, GA	. 30329							
at er	id of year	F Grou	up exemption number	(See instructi	ons for	Block F on page 9.) ▶				
	3,989,123.	G Che	ck organization type	▶ X 50°	(c) cor	poration	501(c	c) trust	401(a)	trust	Other true
		•	mary unrelated busine				(-	,			
	-		orporation a subsidiar			n or a narent-subsid	iary con	strolled aroun?		•	Yes X N
			entifying number of the	•	•		iary corr	ili olica group:			, 100 1
			SUSAN MADARA				elenhon	ne number >	404-72	7-3103	
Part			or Business Inc			(A) Income		(B) Expe			C) Net
	Gross receipts or			1		(r ty mooning		(=) =		,	-,
				c Balance ▶	10						
	Less returns and allowa		ulo A lino 7)		1c 2						
	-		ıle A, line 7) from line 1c		3						
			tach Schedule D)		4a						
			rt II, line 17) (attach Form		4b						
			usts		4c						
		-	s and S corporations (atta		5						
					6						
			come (Schedule E)		7						
		-	ies, and rents fro								
					8						
			section 501(c)(7),								
					9						
			come (Schedule I)		10						
			ule J)		11						
	*		of the instructions; attach		12						
			ugh 12			6.0		1			
Part			Taken Elsewhei								
			ibutions, deducti							s income.)	
4	Compensation of	officers, d	lirectors, and trustees	(Schedule K)							
6	Repairs and maint	tenance							16		
7	Bad debts								. 17		
В	Interest (attach sc	hedule)							18		
0	Charitable contribution	utions (Se	ee page 13 of the inst	ructions for lim	itation	rules.)			20		
1	Depreciation (atta	ch Form 4	4562)			21			0.		
2	Less depreciation	claimed o	on Schedule A and els	sewhere on re	turn	22a	1		22b		
3	Depletion								23		
4			ompensation plans								
			· · · · · · · · · · · · · · · · · · ·								
			Schedule I)								_
			chedule J)								
			chedule)								
	Total deductions.										
			income before net or						30		
			n (limited to the amou	-							
									32		
			income before specif								
			lly \$1,000, but see line	ะ วง เทรเเนตเเด							
	Hanalaka d Issael		a linearman Outstand Of P	no 22 f !'	20 10	line 22 is an attack the				1	
	Unrelated busines	ss taxable	e income. Subtract li o or line 32 uction Act Notice, see	ne 33 from line	e 32. If	line 33 is greater that	an line		34		

Part	III T	Fax Computation					
35	Organizat	tions Taxable as Corporations. See instructions for tax computation o	n page 15.				
	Controlled	d group members (sections 1561 and 1563) check here See instructions and:					
а	, ,	ur share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in t	hat order):				
	(1) \$	(2) \$ (3) \$					
b	Enter orga	anization's share of: (1) Additional 5% tax (not more than \$11,750)		- 1			
	(2) Addition	onal 3% tax (not more than \$100,000)					
		ax on the amount on line 34		35c			0.
36		Taxable at Trust Rates. See instructions for tax computation on page 16. In					
		nt on line 34 from: Tax rate schedule or Schedule D (Form 1041)		36			
37		c. See page 16 of the instructions		37			
38		e minimum tax		38			
39		d lines 37 and 38 to line 35c or 36, whichever applies		39			0.
Par		Tax and Payments					
	•	ax credit (corporations attach Form 1118; trusts attach Form 1116) 40a		- 1			
		dits (see page 16 of the instructions)		-			
		pusiness credit. Attach Form 3800		-			
		prior year minimum tax (attach Form 8801 or 8827)		-			
		dits. Add lines 40a through 40d		40e			0.
41		line 40e from line 39		41			
42		s. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (-	42			
43		. Add lines 41 and 42		43			0.
		s: A 2008 overpayment credited to 2009		- 1			
b		mated tax payments		- 1			
С	•	sited with Form 8868		- 1			
	_	organizations: Tax paid or withheld at source (see instructions)		- 1			
		vithholding (see instructions)		- 1			
f		dits and payments: Form 2439					
	For	rm 4136 Total ▶ 44f		-			
45		ments. Add lines 44a through 44f		45			
46		d tax penalty (see page 4 of the instructions). Check if Form 2220 is attached	▶└	46			
47		If line 45 is less than the total of lines 43 and 46, enter amount owed		47			0.
48		ment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid		48			0.
49		amount of line 48 you want: Credited to 2010 estimated tax	Refunded ►	49	47\		0.
Part		Statements Regarding Certain Activities and Other Information (s					
1		me during the 2009 calendar year, did the organization have an interest in or a signature of				Yes	No
		(bank, securities, or other) in a foreign country? If YES, the organization may have to file Form	1 ID F 90-22.1,	кероп	of Foreign		v
•							X
2		te tax year, did the organization receive a distribution from, or was it the grantor of, or tran	steror to, a torei	ign trus	τ?		A
_		the page 5 of the instructions for other forms the organization may have to file.					
3 Sob		amount of tax-exempt interest received or accrued during the tax year ► \$ A - Cost of Goods Sold. Enter method of inventory valuation ►					
				6			
1	•			0			
2							
3				-			
4 a		I section 263A costs Part I, line 2		7	spect to	Vaa	Na
		/ · · · · · · 	`		-	Yes	No
b 5		, i (a.m.) i i i i i i i i i i i i i i i i i i	•				Х
<u> </u>		d lines 1 through 4b 5 to the organization?	and to the best of	of my kn	owledge and h	elief it	
Sigr	correct a	and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled	lge.				
Here				•	RS discuss this		
1161		ure of officer Date Title		struction	er shown belows)? X Ye		No
-	- 9.1010	▶ Date		_	arer's SSN or I		140
Paid		Preparers	eck if		P007468		
	arer's	Firm's name (or SMITH & HOWARD, P.C.	-employed	12504		<u> </u>	
Use	Only	yours if self-employed),	none no. 404-8				
		ATLANTA, GA 30363	IOHEHU. TOT	J , 1 (Form 9	90-T	(2000)
		111111111111111111111111111111111111111			1 01111 3		(2003)

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Schedule C - Rent Income (see instructions on page 18		perty a	and Personal Prop	erty	Leased W	ith Real Prop	erty)		
Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent received	or accrue	ed						
(a) From personal property (if the personal property is more than more than 50%)	ercentage of rent n 10% but not	percenta	from real and personal prop age of rent for personal prop if the rent is based on profi	erty e	xceeds			ected with the income (attach schedule)	
(1)									
(2)									
(3)									
(4)									
Total	Т	otal							
(c) Total income. Add totals of cohere and on page 1, Part I, line 6,	. , . , ,					(b) Total deduct Enter here and or Part I, line 6, colu	n page 1,	•	
Schedule E - Unrelated Do	ebt-Financed Inc	ome(se	ee instructions on pag	e 19)				
1. Description of deb	t-financed property	,	Gross income from or allocable to debt-financed			debt-finance	, · · · · · · · · · · · · · · · · · · ·		
·			property		(a) Straight (attach	aight line depreciation ttach schedule)) Other deductions (attach schedule)	
(1)									
(2)									
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average adjusted of or allocable to debt-financed property (attach schedule)		to 4 divided by column 5				ome reportable x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
<u>(1)</u>				%					
(2)				%					
(3)				%					
(4)				%					
Totals Total dividends-received deducti				▶	Part I, line 7,	. ,		nere and on page 1, line 7, column (B).	
Schedule F - Interest, Ann			Ponte From Contro	llod.	Organiza	tions coo instru	ctions or	2 200	
Schedule F - Interest, Am	Tuities, Royalties		xempt Controlled Org			ilonis(see ilisiiu	CLIOTIS OF	i page 20)	
Name of controlled organization	2. Employer identification number				otal of specified yments made			6. Deductions directly connected with income in column 5	
(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Organiz	zations								
7. Taxable Income	8. Net unrelated ind (loss) (see instruct		9. Total of specified payments made	include	t of column 9 that is d in the controlling ation's gross income	COI	11. Deductions directly connected with income in column 10		
(1)					3	<u> </u>			
(2)									
(3)									
(4)									
Totals				_	Enter here	ns 5 and 10. and on page 1, 8, column (A).	Enter	olumns 6 and 11. here and on page 1, , line 8, column (B).	

Schedule G -Investment II	ncome of a Sec	tion 501(c)(7), (9), or (17) Organi	zatio	n (see inst	ructi	ons on pag	e 20)	
1. Description of income		2. Amount of income 3. Deductions directly connected (attach schedule)				4. Set-asides (attach schedule)			5. Total deduction and set-asides plus col. 4	(col. 3
(1)				,				•		
(2)										
(3)										
(4)										
	Enter here and Part I, line 9, co								Enter here and or Part I, line 9, colu	
Totals ▶	•									
Schedule I - Exploited Exe	empt Activity Inc	come, Othe	r Tha	an Advertising In	com	ne (see instruc	ction	s on page	21)	
Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expense directly connected w production unrelated business incomparison.	rith of	2 minus column 3). If a gain,		Gross income n activity that not unrelated siness income	hat attributable to		7. Excess e expens (column 6 r column 5, b more the column	es ninus ut not an
<u>(1)</u>										
(2)										
(3)										
(4)										
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here an page 1, Par line 10, col. (t I,				•		Enter here on page Part II, line	1,
Totals Schedule J - Advertising I	ncoma (see instri	ictions on na	ne 21	1						
Part I Income From Pe										
Part Income From Pe	Tiouicais Repor	teu on a Co)1150	IIUaleu Dasis						
1. Name of periodical	2. Gross advertising income	3. Direct advertising co		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5	. Circulation income	6	i. Readership costs	7. Excess recosts (columinus column not more column	mn 6 n 5, but than
(1)										
(2)				-						
(3)				-						
(4)				-					_	
(1)										
Totals (carry to Part II, line (5))										
Part II Income From Pethrough 7 on a lin	eriodicals Repor ne-by-line basis.)	ted on a S	epar	ate Basis (For ea	ach p	periodical lis	sted	in Part I	l, fill in colu	mns 2
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		5. Circulation income		i. Readership costs	7. Excess reacosts (columinus column not more column	mn 6 n 5, but than
(1)										
<u>(1)</u> <u>(2)</u>	+									
									_	
(3)										
(4)										
(5) Totals from Part I	Enter here and on page 1, Part I, line 11, col. (A).	Enter here an page 1, Par line 11, col. (rt I						Enter here on page Part II, lin	e 1,
Totals, Part II (lines 1-5) ► Schedule K - Compensation)iroctoro -	nd T	ructoos/secimeter	otio	on non- 04\				
•	on or Officers, L	irectors, a	na ii	,	Ctions	3. Percent of		4. Compe	nsation attributab	le to
1. Name		2. Title		time devoted to 4. Comp				elated business		
							%			
							%			
							%			
							%			
Total. Enter here and on page 1, P	art II, line 14						<u>. </u>			

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