INSTRUCTIONS FOR FILING SOCIETY OF BIBLICAL LITERATURE FORM 8879-EO - IRS E-FILE SIGNATURE AUTHORIZATION FOR THE PERIOD ENDED JUNE 30, 2013

SIGNATURE...

THE ORIGINAL IRS E-FILE SIGNATURE AUTHORIZATION FORM SHOULD BE SIGNED (USE FULL NAME) AND DATED BY THE TAXPAYER.

FILING...

RETURN YOUR SIGNED FORM 8879-EO TO:

SMITH & HOWARD, P.C. 271 17TH STREET, SUITE 1600 ATLANTA GA 30363

PAYMENT OF TAX...
NO PAYMENT OF TAX IS REQUIRED.

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

FORM 8879-EO SERVES AS A REPLACEMENT FOR YOUR SIGNATURE THAT WOULD BE AFFIXED TO FORM 990 IF YOU PAPER FILED YOUR RETURN.
PLEASE DO NOT SEPARATELY FILE FORM 990 WITH THE INTERNAL REVENUE SERVICE. DOING SO WILL DELAY THE PROCESSING OF YOUR RETURN.

WE MUST RECEIVE YOUR SIGNED FORM BEFORE WE CAN ELECTRONICALLY TRANSMIT YOUR RETURN WHICH IS DUE ON FEBRUARY 17, 2014. WE WOULD APPRECIATE YOUR RETURNING THIS FORM AS SOON AS POSSIBLE AS THIS WILL EXPEDITE THE PROCESSING OF YOUR RETURN. THE INTERNAL REVENUE SERVICE WILL NOTIFY US WHEN YOUR RETURN IS ACCEPTED. YOUR RETURN IS NOT CONSIDERED FILED UNTIL THE INTERNAL REVENUE SERVICE CONFIRMS THEIR ACCEPTANCE, WHICH MAY OCCUR AFTER THE DUE DATE OF YOUR RETURN.

INSTRUCTIONS FOR FILING SOCIETY OF BIBLICAL LITERATURE FORM 990T - EXEMPT ORGANIZATION BUSINESS RETURN FOR THE PERIOD ENDED JUNE 30, 2013

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 15, 2014 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

Open to Public

Department of the Treasu

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

The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection Internal Revenue Service 07/01, 2012, and ending 06/30.2013 A For the 2012 calendar year, or tax year beginning D Employer identification number C Name of organization B Check If applic SOCIETY OF BIBLICAL LITERATURE 23-6390716 Doing Business As Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite 350 (404) 727-3100 825 HOUSTON MILL ROAD NE Initial return City, town or post office, state, and ZIP code G Gross receipts \$ 4,277,876. Amended return ATLANTA, GA 30329 H(a) is this a group return for F Name and address of principal officer: Yes X No JOHN KUTSKO 825 HOUSTON MILL ROAD STE 350 ATLANTA, GA 30329 H(b) Are all affiliates included? If "No," attach a list. (see instructions) Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 Website: ► WWW.SBL-SITE.ORG H(c) Group exemption number L Year of formation: 1980 M State of legal domicile: Form of organization: X Corporation Trust Association Other > VA Part I Summary Briefly describe the organization's mission or most significant activities: THE SOCIETY'S MISSION IS TO FOSTER BIBLICAL SCHOLARSHIP. OUR VISION IS Governance TO OFFER MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT, INTELLECTUAL GROWTH, AND PROFESSIONAL DEVELOPMENT. 2 Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 14. Activities & 14. 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 28. 5 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 6 951. 0 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 n b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 215,413. 156,749. 8 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 2,385,384. 2,455,872. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 29,890. 81.890. 10 545,298. 519,838. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12). 3,150,525. 3,239,809. 4,550. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 1,171,134. 1,283,765. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 85, 484. 1,684,163. 1,800,715. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,855,297. 3,089,030. Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 295,228. 150,779. **Beginning of Current Year** End of Year 5,321,895. 5,095,049. 20 Total assets (Part X, line 16) Total liabilities (Part X, line 26) 1,671,265. 1,611,739. 21 훈튀 22 3,423,784. 3,710,156. Net assets or fund balances. Subtract line 21 from line 20. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here Type or print name and title Print/Type preparer's name Date Preparer's signature Check Paid MARC AZAR self-employed P00746804 Preparer Firm's name > SMITH & HOWARD, 58-1250486 P.C Firm's EIN **Use Only** Firm's address ▶ 271 17TH STREET, SUITE 1600 ATLANTA, 404-874-6244

For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

Form **990** (2012)

No

X Yes

IRS e-file Signature Authorization for an Exempt Organization For calendar year 2012, or fiscal year beginning 0.7/0.1. 2012, and ending 0.6/3.0. 20 1.3.

OMB No. 1545-1878

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Department of the Treasury Internal Revenue Service	▶ Do not send to the IRS. Keep for your records.		<u> 20 12</u>
Name of exempt organization		Employer identifi	cation number
SOCIETY OF B	IBLICAL LITERATURE	23-6390	716
Name and title of officer			
	O, EXECUTIVE DIRECTOR		
Part I Type of R	eturn and Return Information (Whole Dollars Only)		
check the box on line leave line 1b, 2b, 3b,	ck here b Total revenue, if any (Form 990-EZ, line 9) heck here b Total tax (Form 1120-POL, line 22) ck here b Tax based on investment income (Form 990-PF, Part V	g filed with this for ered -0- on the ret 12) 1b 2b 3b /I, line 5), 4b	m was blank, then
Part Declaration	on and Signature Authorization of Officer		-
organization's 2012 eleare true, correct, and corganization's electron to send the organization the transmission, (b) the authorize the U.S. Trefinancial institution accreturn, and the financial Agent at 1-888-353-45 involved in the process resolve issues related electronic return and, in Officer's PIN: check of the process of the process resolve issues related electronic return and, in Officer's PIN: check of the process of the process related electronic return and, in Officer's PIN: check of the process of the process of the process related electronic return and, in the process of t	MITH & HOWARD, P.C. to enter my PIN EROfirm name	t of my knowledge a wn on the copy of the electronic return or receipt or reason for any refund. If applic rawal (direct debit) of its federal taxes or contact the U.S. Treat so authorize the fire cessary to answer i	and belief, they ne riginator (ERO) or rejection of cable, I entry to the wed on this asury Financial nancial institutions inquiries and
being filed with	ation's tax year 2012 electronically filed return. If I have indicated within this real a state agency(ies) regulating charities as part of the IRS Fed/State programy PIN on the return's disclosure consent screen.	return that a copy o	
If I have indica	f the organization, I will enter my PIN as my signature on the organization's t ted within this return that a copy of the return is being filed with a state agend tate program, I will enter my PIN on the return's disclosure consent screen.		
Officer's signature	Date >	02/15/2014	
	on and Authentication		
ERO's EFIN/PIN. Enternumber (EFIN) follower certify that the above ndicated above. I conf	your six-digit electronic filing identification	do not enter all ed return for the or	ganization
ERO's signature 🕨	Date >	16	_U_
	ERO Must Retain This Form - See Instructions	0- 0-	
	Do Not Submit This Form To the IRS Unless Requested To D		0070 50
ror Paperwork Reduc	tion Act Notice, see back of form.	For	m 8879-EO (2012)

JSA 2E1676 1,000

	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission:	THE PART THE DK	mu T
	ATTACHMENT 1		
			Control Bally
			100
	Did the organization undertake any significant program services during the year which we		
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		Yes X
	Did the organization cease conducting, or make significant changes in how it cond services?		
	If "Yes," describe these changes on Schedule O.		
1	Describe the organization's program service accomplishments for each of its three larg expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount the total expenses, and revenue, if any, for each program service reported.		
la i	(Code: 611600) (Expenses \$ 1,111,705, Including grants of \$) (I	Revenue \$	1.367.448.
	CONGRESSES - SEE SCHEDULE O	TA = 1 = 1 10	1,301,440.
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	(Code: 323100) (Expenses \$ 991,494. Including grants of \$) (I	Revenue \$	958,843.
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1 2 3	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes X	No
2			. ,	1
	complete Schedule A			
	1 4	2	$\stackrel{\frown}{}$	Х
3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	-		
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		-	
4		4		х
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	7-1		
5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
		5		х
6	Part III			
0	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
0	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
7	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	- 1		
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	Ť	-	
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	-	
**	VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		_	
а	complete Schedule D, Part VI	11a	х	
	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	116		x
_	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.	11c		х
н	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	11d	Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	-		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12 9	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
120	complete Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			100
_	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	!	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
• •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
20 a			_	$\overline{}$
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Par	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			L.,
	in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21_		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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			
	employees? If "Yes," complete Schedule J	23	Х	
24 a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
		24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	===	
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		W. II	
	man and desired better the service and desired control of the service and the	25a		Х
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 990-EZ?		-9011	
	If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L. Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	- 1	= 11	
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		144	
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X_
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,		W. II	
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
			990	(2012)

Form 990 (2012)

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Par	Check if Schedule O contains a response to any question in this Part V			\Box
	Official in Schedule O contains a response to any question in this cart v		Yes	No
18	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and		33.5	
	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 28		100	
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 (see instructions)		10.1	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	35	-	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		-	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			v
	account)?	4a		Х
b	if "Yes," enter the name of the foreign country: ►			
-		5a		х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 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 line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-		
va	organization solicit any contributions that were not tax deductible as charitable contributions?	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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	H 1		
	and services provided to the payor?	7a		Х
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		10	
	required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization 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		Х
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<u>7g</u>		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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:			100
	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			
ь	Gross income from other sources (Do not net amounts due or paid to other sources	Ù.		-1
	against amounts due or received from them.)	8.1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.	41		
Ь	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans		127	
	Enter the amount of reserves on hand	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
104				

Form **990** (2012)

SOCIETY OF BIBLICAL LITERATURE Form 990 (2012) 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. l x l Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 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? . . . X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... Х Did the organization become aware during the year of a significant diversion of the organization's assets?.... Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Х 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8a Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c Х 13 Did the organization have a written whistleblower policy?.... 13 X 14 Did the organization have a written document retention and destruction policy?......... 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? Х 15a X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶_GA___ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

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Form 990 (2012)

organization: Susan Madara 825 Houston Mill Road Suite 350 Atlanta, GA 30329

State the name, physical address, and telephone number of the person who possesses the books and records of the

404-727-3103

Form 990 (201:	SOCIETY OF BIBLICAL LITERATURE	23-6390716	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highes	Compensated Employees,	and
_	Independent Contractors		
	Check if Schedule O contains a response to any question in this Part VII		
041 4	CONTRACT District Tourist Key Englance and Highest Company and Emplane		

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

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

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

(A) Name and Title	(B) Average hours per week (list any	box,	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
- CURRY B AVERDON	1 00									
(1) CHERYL B. ANDERSON MEMBER	1.00	х			-			-	ا	
(2) GREGORY STERLING	1.00	Α_		-	-					
MEMBER		X		_ [0	0	
(3) JEFFREY K. KUAN MEMBER	1.00	х		_				0	0	
(4) FERNANDO F. SEGOVIA MEMBER	1.00	х	П					0	0	
(5) FRANCISCO LOZADA MEMBER	1.00	х						C	0	
(6) ADELE REINHARTZ MEMBER	1.00	x						C	0	
(7) JOHN STRONG MEMBER	1.00	х							0	
(8) PHILIP F. ESLER MEMBER	1.00	х	W			=	Г		0	
(9) ARCHIE CHI-CHUNG LEE MEMBER	1.00	х						C	0	
(10) CHRISTINE M. THOMAS MEMBER	1.00	х						0	0	l
(11) JOHN CROSSAN MEMBER	1.00	х				_ 1			0	1
(12) DANIEL SCHOWALTER	1.00	.,						x = = =		
MEMBER (13) GERALD WEST MEMBER	1.00	X	=			1	×		0	
MEMBER (14) MARY FOSKETT MEMBER	1.00	x	1 1			Ш			0	

Form 990 (2012)

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 51
1a	Federated campaigns	<u>1a</u>	140				
ь	Membership dues		10 = -		- "in		
С	Fundraising events	1c		30 13			
d	Related organizations	1 1					
e	Government grants (contribu	ıtions) 1e					
f	All other contributions, gifts, gran	nts,					
	and similar amounts not included	abova . 1f	156,749.				
g	Noncash contributions included	in lines 1a-1f: \$					
h	Total. Add lines 1a-1f			156,749.	ENDER WE		
			Business Code				
2a	CONGRESSES		611600	1,367,448.			1,367,44
ь	MEMBERSHIP DUES		611600	636,016.	587,240.		48,77
С	PUBLICATIONS		323100	329,911.	295,386.		34,52
d	PROFESSIONS		541900	110,710.			110,710
	REGIONS		611600	11,787.	11,787.		
1	All other program service rev	renue					
g	Total. Add lines 2a-2f			2,455,872.			
3	Investment income (includin						
	other similar amounts)AT	TACHMENT 3	▶_	63,555.			63,55
4	Income from investment of t			0			
5	Royalties			163,667.			163,66
_		(i) Real	(ii) Personal				
6a	Gross rents	122,500.					
ь	Less: rental expenses	100,430.					
c	Rental income or (loss)	22,070.					
ď				-40,668.			-40,668
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory	913,006.					
ь	Less: cost or other basis						
_	and sales expenses	894,671.					
c	Gain or (loss)		OI I				
d	Net gain or (loss)	•		18,335.			18,33
<u> </u>	Gross income from fundra					-	
8a		iisiiig					
	events (not including \$	line 4n)					
	of contributions reported on See Part IV, line 18						
i i	Less: direct expenses		1				- п
b	Net income or (loss) from ful			0			
	Gross income from gaming a	_				The Control of the Land of the Control	
9a	See Part IV, line 19						
	Less: direct expenses						
b C	Net income or (loss) from ga			0			
10a	Gross sales of inventoreturns and allowances	ory, less					
	Less: cost of goods sold ?	ATCH.4. b	42,966.				
C	Net income or (loss) from sal Miscellaneous Reven		Business Code	422,299.	422,299.		
11a					-		
b							
¢							
q	All other revenue Total. Add lines 11a-11d .						

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	T									1			
(A) Name and title	Average hours per week (list any	box,	unles	Pos heck is pe	mon mon	is both	an	Reportable compensation from	Reportable compensation frelated		am	(F) timated tount of other pensation	f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensate employee	Former	organization (W-2/1099-MISC)			and	om the anizatio I related inization	on d
.5) CAROL MEYERS	1.00	 				_		0111 = =		+			ŧ
MEMBER		X	Щ				_	0		0	-41		(
6) STEVEN FRISEN	1.00	v							- " - = "				(
MEMBER 7) JOHN F KUTSKO EXECUTIVE DIRECTOR	60.00	Î		x				131,084.		0		29,9	
		_								\perp			
				1			_						
					É		L						
1b Sub-total							▶	0		0			0
· ·	_									- 9		29,9 29,9	~~
2 Total number of individuals (including but not	limited to t	hose	liste				o re	····	\$100,000 of	9	-4		
reportable compensation from the organization	n ►											Yes	No
											3		х
											3		Ŷ
organization and related organizations gr	eater than	\$15	0,0	00?	lf.	"Ye:	5," (complete Schedu	le J for such	7		х	
											4	^	
for services rendered to the organization? If "Y	es," comple	te Sch	edu	le J	for	such	per	son			5		Х
1 Complete this table for your five highest com	npensated i compensati	ndepe on for	nde the	ent d	cont	tracto lar ye	ırs t ar e	hat received more ending with or with	than \$100,00 nin the organiza	0 of ation's	s tax		
(A)	dress							(B) Description of se	rvices	Co	(C)	ation	
NONE	Nour for weak list stry hours for street and a directorizated organizations and a directorizated organization should be recompensation from the organization should be recompensation from the organizations (W-2/1099-MISC) MEYERS												
							F						
							+						
2 Total number of independent contractors (i more than \$100,000 in compensation from the compensation from				nited		tho:	se li	isted above) who	received				

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).

	Check if Schedule O contains a respond include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	4,550.	4,550.		THE COURT OF THE
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	165,384.	134,237.	15,711.	15,436.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	879,688.	833,293.	20,693.	25,702.
8	Pension plan accruals and contributions (include section			E VIII III III III	
	401(k) and 403(b) employer contributions)	83,688.	79,190.	2,023.	2,475.
9	Other employee benefits	76,148.	61,952.	6,008.	8,188.
10	Payroll taxes	78,857.	73,281.	2,587.	2,989.
11	Fees for services (non-employees):		11 111111111111111111111111111111111111		
8	Management				
b	Legal	21,668.	18,560.	113.	2,995.
С	Accounting	35,790.	30,367.	3,549.	1,874.
	Lobbying	9		and City	
	Professional fundraising services. See Part IV, line 17	0 0 0 0 0 0		0.070	
	Investment management fees	9,870.		9,870.	
9	Other. (# line 11g amount exceeds 10% of line 25, column	210 120	200,062.	5,833.	4,234.
42	(A) amount, list line 11g expenses on Schedule O.),	210,129. 19,380.	19,380.	3,033.	4,234.
12	Advertising and promotion	72,155.	67,648.	2,916.	1,591.
13	Office expenses	95,274.	85,241.	6,075.	3,958.
14	Information technology	43,663.	43,663.	0,075.	5,550.
15 16	Royalties	110,000.	93,000.	11,000.	6,000.
17	Occupancy	131,811.	124,539.	4,425.	2,847.
18	Payments of travel or entertainment expenses	0	= === =================================	1,1231	2,01.1
19	for any federal, state, or local public officials Conferences, conventions, and meetings	550,057.	547,320.	718.	2,019.
20		0	347/320.	,10.	2/013.
21	Interest Payments to affiliates Payments	0		1 1 1 1 1 1 1 1 1	
22	Depreciation, depletion, and amortization	19,207.	15,253.	1,921.	2,033.
23	Insurance	14,116.	12,186.	828.	1,102.
24	Other expenses. Itemize expenses not covered				III A A A
	above (List miscellaneous expenses in line 24e. If	es gliet			
	line 24e amount exceeds 10% of line 25, column			The little is	
	(A) amount, list line 24e expenses on Schedule O.)			10.2	
а	PRINTING	250,595.	250,595.		
_	OTHER EXPENSES	75,969.	74,994.	654.	321.
C	DISTRIBUTION COSTS	64,759.	64,759.		
d	DUES AND DISCOUNTS	41,150.	39,926.	716.	508.
e	All other expenses	35,122.	32,534.	1,376.	1,212.
25 26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	3,089,030.	2,906,530.	97,016.	85,484.
JSA	following SOP 98-2 (ASC 958-720)	0			Form 990 (2012)

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Гd	rt X	Balance Sheet Check if Schedule O contains a response to any question in this Part	X		x
		entering of the state of the st	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	0	1	(
	2	Savings and temporary cash investments	1,483,829.	2	1,403,689.
	3	Pledges and grants receivable, net	8,000.		6,700.
	4	Accounts receivable, net	195,659.		213,596.
	5	Loans and other receivables from current and former officers, directors,			
	_	trustees, key employees, and highest compensated employees.			
			0	5	
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
ets	7	Notes and loans receivable, net	0	7	= _ 0
Assets	8	Inventories for sale or use	45,455.	8	42,963.
	9	Inventories for sale or use Prepaid expenses and deferred charges	43,096.	9	22,230.
	10 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 203, 236.			
	b	Less: accumulated depreciation	28,646.	10c	75,786.
	11	Investments - publicly traded securities	1,307,143.		1,614,460.
	12	Investments - other securities. See Part IV, line 11		12	= 0
	13	Investments - program-related. See Part IV, line 11		13	0
	14	Intangible assets		14	= 0
	15	Other assets. See Part IV, line 11	1,983,221.		1,942,471.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,095,049.		5,321,895.
\neg	17	Accounts payable and accrued expenses	237,276.	-	246,072.
	18	Grants payable		18	0
	19	Deferred revenue ATCH 7	1,433,989.		1,365,667.
	20	Tax-exempt bond liabilities		20	0
m	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Labilities	22	Loans and other payables to current and former officers, directors,			
喜		trustees, key employees, highest compensated employees, and			
3		disqualified persons. Complete Part II of Schedule L	0	22	0
-	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X		1 1	
		of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	1,671,265.	-	1,611,739.
- 8	-	Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			
Ë	27	Unrestricted net assets	2,929,457.	27	3,141,269.
震	28	Temporarily restricted net assets	199,947.	28	274,257.
힏	29	Permanently restricted net assets	294,380.	29	294,630.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds		30	
38	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	*
2	33	Total net assets or fund balances	3,423,784.	33	3,710,156.
_	34	Total liabilities and net assets/fund balances	5,095,049.	+	5,321,895.
					Form 990 (2012)

Check if Schedule O contains a response to any question in this Part XI. 1 Total revenue (must equal Part VIII, column (A), line 12)	Form 9	90 (2012)				PE	ge IZ
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 2 3,089,0 3 Revenue less expenses. Subtract line 2 from line 1 4 3,239,8 4 150,7 5 Net unrealized gains (losses) on investments 5 135,5 6 Donated services and use of facilities 6 Investment expenses 7 7 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at he of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 11 Part XIII Financial Statements and Reporting 12 Check if Schedule O contains a response to any question in this Part XII 13 Accounting method used to prepare the Form 990: Scah X Accrual Other 15 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 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2b Separate basis Consolidated basis, or both: 3c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis basis Both consolidated and separate basis 5c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 3c If Yes, "check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 3c If Yes, "check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis or both: 3c If Yes, "check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated ba	Part	XI Reconciliation of Net Assets					
Total expenses (must equal Part IX, column (A), line 25)		Check if Schedule O contains a response to any question in this Part XI					
Total expenses (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 2 from line 1. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). Net unrealized gains (losses) on investments. Donated services and use of facilities. Investment expenses. Prior period adjustments. Prior period adjustments. Net assets or fund balances (explain in Schedule O). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). Thancal Statements and Reporting Check if Schedule O contains a response to any question in this Part XII. 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. Accounting method used to prepare the Form 990: Cash X Accrual Other If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis or both: Separate basis. Consolidated basis Both consolidated and separate basis Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis or both: X Separate basis. Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,2	39,	309.
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2		2				
5 Net unrealized gains (losses) on investments 5 135,5 6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 3, 710, 1 Part XIII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	3		3				
5 Net unrealized gains (losses) on investments	4	·	4		3,4	23,	784.
6 Donated services and use of facilities	5		5	HID	1	35,	593.
8 Prior period adjustments	6		6				0
8 Prior period adjustments	7	Investment expenses	7				0
9 Other changes in net assets or fund balances (explain in Schedule O)	8		8				0
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	9	· · · ·	9				0
Check if Schedule O contains a response to any question in this Part XII	10						
Check if Schedule O contains a response to any question in this Part XII		33, column (B))	10		3,7	10,	156.
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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	Part						
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Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	1	Accounting method used to prepare the Form 990: Cash X Accrual Other					TV.
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If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		Schedule O.			1204		
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Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?		If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	OL	100		
b Were the organization's financial statements audited by an independent accountant?		reviewed on a separate basis, consolidated basis, or both:					
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separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	Ī						
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of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	C		siaht				
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3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			мрішіі		390		
	32		t forth	in]	
the diligio Addit Act and Diliculal A-1351	Ja		LIOITI		3a		l x
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	le.		lerco	the			
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	D			(116	3b		

Form 990 (2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No. 1545-0047
2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

IET	Y OF BIBLICAL	LITERATURE							23-	-6390	716	
11	Reason for Publ	ic Charity Status	s (All organizations mu	st con	nplete	this pa	art.) Se	e instr	uctions			
orga	nization is not a priv	ate foundation be	cause it is: (For lines 1 th	rough	11, che	ck only	one bo	k)				
	A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)(1)(A)(i)				
┑	A school described	in section 170(b)	(1)(A)(ii). (Attach Schedul	e E.)								
\neg		* *	* * *	-	sectio	n 170(b)(1)(A)	(III).				
\neg									n 170(b)(1)(A)	(iii). Ente	r the
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		(ii) EIN		(iv) organi:	is the zation in					(VII) Ar		etary
	organization.		above or IRC section	col. (i) listed in in col. (i)		. (i) of	cot. (i) o	rganized		/		
			(see instructions))	docu	ment?	-		_				
				Yes	No	Yes	No	Yes	NO	<u> </u>		
						-		<u> </u>	 			
					 							
								1	1			
				_	_	_			-	_		

	til oorga	Reason for Public organization is not a prival A church, convention A school described A hospital or a cool A medical research hospital's name, city An organization opsection 170(b)(1)(A A federal, state, or An organization that described in section A community trust of A community trust of An organization organization, check Since August 17, 2 following persons? (i) A person who and (iii) below, (ii) A family membicide of the converted of the control of the converted organization organization, check Since August 17, 2 following persons? (ii) A person who and (iii) below, (iii) A family membicides or a converted organization organiz	organization is not a private foundation bed A church, convention of churches, or A school described in section 170(b) A hospital or a cooperative hospital is A medical research organization op hospital's name, city, and state: An organization operated for the bed section 170(b)(1)(A)(iv). (Complete F A federal, state, or local government An organization that normally received described in section 170(b)(1)(A)(vi). A community trust described in section X an organization that normally received receipts from activities related to its support from gross investment incompact and operation organization after Jurch An organization organized and operation and operation organized and operation organized and operation organized and operation organization organized and operation organization organized and operation organization organized and operation organized and operation organized and operation organization organized and operation organization organized and operation organization organized and operation	Reason for Public Charity Status (All organizations mu organization is not a private foundation because it is: (For lines 1 the A church, convention of churches, or association of churches or A school described in section 170(b)(1)(A)(ii). (Attach Schedule A hospital or a cooperative hospital service organization described in a conjunction with hospital's name, city, and state: An organization operated for the benefit of a college or universection 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3 % receipts from activities related to its exempt functions - subjust support from gross investment income and unrelated busin acquired by the organization after June 30, 1975. See section An organization organized and operated exclusively to test for An organization organized and operated exclusively for the purposes of one or more publicly supported organizations de 509(a)(3). Check the box that describes the type of supporting a Type II b Type III c Type III-Function By checking this box, I certify that the organization is not persons other than foundation managers and other than one 509(a)(1) or section 509(a)(2). If the organization received a written determination from the organization, check this box Since August 17, 2006, has the organization accepted any gift following persons? (i) A person who directly or indirectly controls, either alor and (iii) below, the governing body of the supported organization (iii) A family member of a person described in (i) above? (iii) Name of supported (iii) EIN (iiii) Type of organization	Reason for Public Charity Status (All organizations must congranization is not a private foundation because it is: (For lines 1 through A church, convention of churches, or association of churches described A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in A medical research organization operated in conjunction with a hospital's name, city, and state: An organization operated for the benefit of a college or university section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described An organization that normally receives a substantial part of its supp described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Fart III.) A community trust des	Reason for Public Charity Status (All organizations must complete organization is not a private foundation because it is: (For lines 1 through 11, che A church, convention of churches, or association of churches described in set A school described in section 170(b)(1)(A)(II). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section A medical research organization operated in conjunction with a hospital hospital's name, city, and state: An organization operated for the benefit of a college or university owned section 170(b)(1)(A)(w). (Complete Part II.) A federal, state, or local government or governmental unit described in section 4 norganization that normally receives a substantial part of its support for described in section 170(b)(1)(A)(w). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vI). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vI). (Complete Part III.) An organization that normally receives: (1) more than 331/3 % of its support receipts from activities related to its exempt functions - subject to certal support from gross investment income and unrelated business taxable acquired by the organization after June 30, 1975. See section 509(a)(2). (() An organization organized and operated exclusively to test for public safety. An organization organized and operated exclusively for the benefit of, purposes of one or more publicly supported organizations described in s 509(a)(3). Check the box that describes the type of supporting organization a Type II c Type III-Functionally integrate persons other than foundation managers and other than one or more publicly supported organization and (iii) the organization received a written determination from the IRS that it organization, check this box. Since August 17, 2006, has the organization accepted any gift or contribution following persons? (i) A person who directly or indirectly controls, either alone or togethe and (iii) below, the governing body of the	Reason for Public Charity Status (All organizations must complete this particular programization is not a private foundation because it is: (For lines 1 through 11, check only A church, convention of churches, or association of churches described in section A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b) A medical research organization operated in conjunction with a hospital describospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated in 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170 An organization that normally receives a substantial part of its support from a gordescribed in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A norganization that normally receives: (1) more than 331/3 % of its support from receipts from activities related to its exempt functions - subject to certain excelestation and acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete An organization organized and operated exclusively to test for public safety. See see An organization organized and operated exclusively for the benefit of, to perfurposes of one or more publicly supported organizations described in section 509(a)(3). Check the box that describes the type of supporting organization and coal Type I b Type II c Type III-Functionally integrated By checking this box, I certify that the organization is not controlled directly persons other than foundation managers and other than one or more publicly supported organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from following persons? (ii) A person who directly or indirectly controls, either alone or tog	Reason for Public Charity Status (All organizations must complete this part.) Se organization is not a private foundation because it is: (For lines 1 through 11, check only one both A church, convention of churches, or association of churches described in section 170(b)(A school described in section 170(b)(1)(A)(II). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A) A medical research organization operated in conjunction with a hospital described in hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated is section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A) An organization that normally receives a substantial part of its support from a government described in section 170(b)(1)(A)(vI). (Complete Part II.) X An organization that normally receives: (1) more than 33/13% of its support from contrib receipts from activities related to its exempt functions - subject to certain exceptions, support from gross investment income and unrelated business taxable income (less acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part II.) An organization organized and operated exclusively to test for public safety. See section 509(a)(3). Check the box that describes the type of supporting organization and complete a Type II b Type II c Type III-functionally integrated d Pychecking this box, I certify that the organization is not controlled directly or indirectly or section 509(a)(2). If the organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of following persons? (i) A person who directly or indirectly controls, either alone or together with person and (iii) below, the governing body of the supported organization in cd, (i) (ii) ElN (iii) ElN (iii) ElN (iii) Type of organization (s). (iv) Did you notify over power	Reason for Public Charity Status (All organizations must complete this part.) See instructions in the private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a go section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit described in section 170(b)(1)(A)(v). A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) A organization that normally receives: (1) more than 331/3 % of its support from contributions, receipts from activities related to its exempt functions - subject to certain exceptions, and (2) support from gross investment income and unrelated business taxable income (less section acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the funct purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). The public safety. See section 509(a)(1) or section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, per II, and III organization received a written determination from the IRS that it is a Type I, Type II, organization, check this box. Since August 17, 2006, has the organi	Reason for Public Charity Status (All organizations must complete this part.) See instructions organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b) hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a government section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or for described in section 170(b)(1)(A)(vi). (Complete Part II.) A community frust described in section 170(b)(1)(A)(vi). (Complete Part III.) A norganization that normally receives: (1) more than 331/3 % of its support from contributions, member receipts from activities related to its exempt functions - subject to certain exceptions, and (2) normal support from gross investment income and unrelated business taxable income (less section 511 acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to retain exceptions, and (2) normal support from gross investment income and unrelated business taxable income (less section 511 acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to retain exceptions of the functions of purposes of one or more publicly supported organization described in section 509(a)(1) or section 509(a)	Reason for Public Charity Status (All organizations must complete this part.) See instructions. organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(I). A school described in section 170(b)(1)(A)(II). (Altach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(III). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(III). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(III). An organization operated for the benefit of a college or university owned or operated by a governmental unit section 170(b)(1)(A)(IV). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(V). An organization that normally receives a substantial part of its support from a governmental unit or from the described in section 170(b)(1)(A)(V). (Complete Part II.) A community trust described in section 170(b)(1)(A)(V). (Complete Part II.) An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership for receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than support from gross investment income and unrelated business taxable income (less section 511 tax) from acquired by the organization organized and operated exclusively to test for public safety. See section 59(a)(4). An organization organized and operated exclusively to test for public safety. See section 59(a)(4). An organization organized and operated exclusively to test for public safety. See section 59(a)(4). An organization organized and operated exclusively to test for public safety. See section 59(a)(4). An organization organized and operated exclusively in test for public safety. See section 59(a)(4). An orga	Reason for Public Charity Status (All organizations must complete this part.) See instructions. organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(II). A school described in section 170(b)(1)(A)(II). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(III). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(III). A neganization operated for the benefit of a college or university owned or operated by a governmental unit describe section 170(b)(1)(A)(IV). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(V). An organization that normally receives a substantial part of its support from a governmental unit or from the general prescribed in section 170(b)(1)(A)(V). (Complete Part II.) A community trust described in section 170(b)(1)(A)(VI). (Complete Part III.) A organization that normally receives: (1) more than 33/13 % of its support from contributions, membership fees, and receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33/13% or its support from gross investment income and unrelated business taxable income (less section 511 tax) from busine acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry our purposes of one or more publicly supported organizations described in section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry our purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). By checking this box, I certify that the organization described

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

Schedule A (Form 990 or 990-EZ) 2012

Pa	Support Schedule for Or (Complete only if you chec Part III. If the organization f	ked the box o	n line 5, 7, or	8 of Part I or if	the organizat	tion failed to q	
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		-	-	1		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge			- -	I I I I	100 100	
4	Total. Add lines 1 through 3						
5	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				Towns and		
6	shown on line 11, column (f) Public support. Subtract line 5 from line 4.						
	tion B. Total Support		1				
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4			T			
8	Gross income from Interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			 			
9	Net income from unrelated business activities, whether or not the business is regularly carried on			400	-		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					111	
11	Total support. Add lines 7 through 10		are an office and a settle	DELINE CO.			
12	Gross receipts from related activities, etc. (12	
13	First five years. If the Form 990 is f organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2012 (li			11, column (f))		14	%
15						15	%
16a	331/3% support test - 2012. If the c						
	this box and stop here. The organizati	•		_			
b	331/3% support test - 2011. If the	-					
	check this box and stop here. The org						
1/a	10%-facts-and-circumstances test - 2		_				
	10% or more, and if the organization Part IV how the organization meets						
	organization			_			
b	10%-facts-and-circumstances test						
-	15 is 10% or more, and if the orga						
	Explain in Part IV how the organizati						
	supported organization						
18	Private foundation. If the organization						
	instructions						
						Schedule A (Form !	990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

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

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	97,711.	162,915.	150,393.	215,413.	156,749.	783,181.
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	2,348,603.	2,279,036.	2,475,383.	2,859,185.	2,921,137.	12,883,344.
3	Gross receipts from activities that are not an						 -
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid				1		
	to or expended on its behalf	-					0
5	The value of services or facilities	i	_				
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	2,446,314.	2,441,951.	2,625,776.	3,074,598.	3,077,886.	13,666,525.
	Amounts included on lines 1, 2, and 3	2,110,321.	2,112,73211	= 70237770	3,0.11,030.	2,011,000	10/110/110/
	received from disqualified persons	8,765.	11,570.	16,167.	75.		36,577.
ь	Amounts included on lines 2 and 3	0,703.	11,570.	10,107.	73.		30,3
	received from other than disqualified						
	persons that exceed the greater of \$5,000	3,103.					3,103.
_	or 1% of the amount on line 13 for the year	11,868.	11,570.	16,167.	75.		39,680.
8	Add lines 7a and 7b	11,000.1	11,570.	10,107.	,,,		39,000.
۰	line 6.)					V 1	13,626,845.
Sac	tion B. Total Support						13,020,043.
-	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	2,446,314.	2,441,951.	2,625,776.	3,074,598.	3,077,886.	13,666,525.
	Gross income from interest, dividends,	2,446,314.	2,441,951.	2,625,776.	3,074,338.	3,011,888.	13, 666, 323.
	payments received on securities loans,					2 1	
	rents, royalties and income from similar	217,088.	234,062.	244,296.	331,171.	349,722.	1,376,339.
h	Unrelated business taxable income (less	217,088.	234,002.	244,290.	331,171.	345,122,	1,370,339.
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0 11			- AL III		
_	Add lines 10a and 10b	217,088.	224 252	244 226	331,171.	240 722	1,376,339.
	Net income from unrelated business	217,088.	234,062.	244,296.	_ 331,171.	349,722.	1,3/6,339.
11	activities not included in line 10b,						
	whether or not the business is regularly	_					
	carried on						
12	Other income. Do not include gain or					76.0	
	loss from the sale of capital assets	36.040	24.262				20 612
42	(Explain in Part IV.) ATCH .1	36,249.	34,363.				70,612.
13	Total support. (Add lines 9, 10c, 11,				2 405 750	7 427 520	
	and 12.)	2,699,651.	2,710,376.	2,870,072.	3,405,769.	3,427,608.	15,113,476.
14		-			•		· · · ·
500	organization, check this box and stop here. tion C. Computation of Public Sup		_				
15	Public support percentage for 2012 (line 8,			n (f))		15	90.16%
			•				89.71%
16	Public support percentage from 2011 Sche					16	0001170
	tion D. Computation of Investmer) askuma (6)		47	9.11%
17	Investment income percentage for 2012 (list				• • • • • •	17	8.86%
18	Investment income percentage from 2011				L	18	
19 a	331/3% support tests - 2012. If the org						
_	17 is not more than 331/3%, check thi						_
Ь	331/3% support tests - 2011. If the orga						
	line 18 is not more than 331/3%, check						

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

mod dodono).		111111111111111111111111111111111111111			ATTACHMENT 1	
SCHEDULE A, PART	III - OTHER INCOM					
DESCRIPTION	2008	2009	2010	2011	2012	TOTAL
OTHER	36,249.	34,363.				70,612.
TOTALS	36,249.	34, 363				70,612.

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

soc	IETY OF BIBLICAL LITERATURE		23-6390716
Pai	Organizations Maintaining Donor Ad	vised Funds or Other Similar Funds or	r Accounts. Complete if the
_	organization answered "Yes" to Form		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		<u> </u>
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	r advisors in writing that the assets held in	donor advised
	funds are the organization's property, subject to t	he organization's exclusive legal control? .	Lyes No
6	Did the organization inform all grantees, donors,	and donor advisors in writing that grant fun	ds can be used
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		
Pai		if the organization answered "Yes" to F	orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the	ne organization (check all that apply).	
	Preservation of land for public use (e.g., red	creation or education) Preservation of	of an historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization	held a qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year.		
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easemer		1 1
C	Number of conservation easements on a certified	* *	2c
d	Number of conservation easements included in (
_	historic structure listed in the National Register.		
3	Number of conservation easements modified, tra	insferred, released, extinguished, or termin	nated by the organization during the
_	tax year >		
4	Number of states where property subject to cons		
5	Does the organization have a written policy regarding violations, and enforcement of the conservation of		
e	Staff and volunteer hours devoted to monitoring,		
6	90	inspecting, and emorcing conservation eas	seriferits during the year
7	Amount of expenses incurred in monitoring, inspe	acting, and enforcing consequation easeme	nts during the year
•	>\$	scung, and emorcing conservation easeme	inta during the year
8	Does each conservation easement reported on li	ine 2/d) ahove satisfy the requirements of sa	ection 170/h)/4)/B)
•	(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization report	s conservation easements in its revenue an	d expense statement, and
_	balance sheet, and include, if applicable, the text		
	organization's accounting for conservation easen	_	
Pai		ns of Art, Historical Treasures, or Othe	r Similar Assets.
-	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under	SFAS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	If the organization elected, as permitted under sworks of art, historical treasures, or other simpublic service, provide, in Part XIII, the text of the	ilar assets held for public exhibition, edu footpote to its financial statements that des	ication, or research in furtherance of scribes these items.
ь	If the organization elected, as permitted under		
	works of art, historical treasures, or other sim	itar assets held for public exhibition, edu	ucation, or research in furtherance of
	public service, provide the following amounts rela	ating to these items:	
	(i) Revenues included in Form 990, Part VIII, line		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of	art, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under		
a	Revenues included in Form 990, Part VIII, line 1		> \$
la la	Assets included in Form 990 Part Y		L E

Pai	t III Organizations Maintain	ing Collec	tions o	f Art, His	storical	Treasures	, or O	her Simila	ar Asso	ets (conti	inued)
3	Using the organization's acquisition collection items (check all that app	on, accession, ly):	on, and o	other reco	rds, chec	k any of th	e follow	ing that ar	e a sign	ificant use	e of its
а	Public exhibition			d [Loan	or exchange	e progra	ms			
b	Scholarly research			e [Other	_					
C	Preservation for future gene	rations			_						
4	Provide a description of the organ	nization's co	ollections	and expl	ain how t	hey furthe	r the or	ganization's	exemp	purpose	in Part
	XIII.										
5	During the year, did the organization assets to be sold to raise funds rath								-	Yes	No
Pai	t IV Escrow and Custodial	Arrangeme	ents. C	omplete i	f the org	anization	answe	red "Yes"	to Form	1 990, P	art IV,
	line 9, or reported an am	ount on Fo	orm 990	, Part X, I	ine 21.						
	1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table:										
								An	nount		
C	Beginning balance										,148.
d	Additions during the year										,031.
8	Distributions during the year									65	,170.
	Ending balance										,009.
2a	Did the organization include an am	ount on For	m 990, f	Part X, line	21?				L		X No
ь	If "Yes," explain the arrangement in										
Par	tV Endowment Funds. Con										
		(а) Ситег		(b) Prio		(c) Two yea		(d) Three ye		(e) Four ye	
	Beginning of year balance	437	,584.	49	9,253.		,733.	406	,603.		9,934
	Contributions		250.		225.	11	,167.		445.	4	2,711
C	Net investment earnings, gains,		1								
	and losses	68	,589.	1	3,247.		,027.	54	,785.	-7	6,042.
	Grants or scholarships					2	,000.				
8	Other expenditures for facilities		_			11					
	and programs			7	5,000.	59	674.		100.		
f	Administrative expenses		279.		141.						
g	End of year balance		,144.		7,584.		,253.		<u>,733.</u>	40	6,603
2	Provide the estimated percentage		nt year e	nd balance	e (line 1g,	column (a)) held as	•			
a	Board designated or quasi-endown			_%							
b	Permanent endowment ▶ 90.1										
	Temporarily restricted endowment The percentages in lines 2a, 2b, an	nd 2c should	equal 10								
3a	Are there endowment funds not in	the possess	sion of th	ne organiza	ation that	are held ar	nd admir	istered for t	he		
	organization by:									Ye	
	(i) unrelated organizations									3a(i)	X
	(ii) related organizations									3a(ii)	X
	If "Yes" to 3a(ii), are the related org						• • • • •	• • • • • •		3b	
4 Par	Describe in Part XIII the intended ut VI Land, Buildings, and Equ										
	Description of property		(a) Cost or (invest	other basis ment)		r other basis ther)		cumulated eciation	(d) Book value	a.J
1a	Land										
ь	Buildings	<u> </u>									
C	Leasehold improvements										
d	Equipment				2	203,236.	1	27,450.		75	,786.
	Other				 						
	I. Add lines 1a through 1e. (Column		ual Form	990. Part	X, columr	(B), line 10)(c).)	▶		75	,786.
	V	, , == 34		, =:-		, ,, .=	.,,,,		Sched	ule D (Form	
J\$A 2E126	3 1.000										

Page	3

Part VII	Investments - Other Securities. See F	orm 990, Part X, line	12.	1000
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio Cost or end-of-year market	
(1) Financi	al derivatives			
(2) Closely	-held equity interests	111		
(3) Other_				
(B)				
(C)				
(D)				
(E)				
(F) (G)				
(H)				
(0)				
	nn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII		orm 990, Part X, line	e 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuatio Cost or end-of-year market	n: value
(1)				
(2)			<u> </u>	
(3)		1	- W	
(4)				
(5)				
(6)	-			
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, col. (B) line 13.)			211/7/83
Part IX	Other Assets. See Form 990, Part X, II	ne 15.		
	(a)	Description		(b) Book value
	CENTER FIXED ASSETS	II		1,531,365.
	CENTER ENDOWMENT FUND			411,106.
(3)				
(4)				
(5)				
(6)	•			
(7)	_			
(8)				
(10)				
	umn (b) must equal Form 990, Part X, col. (B) i	line 15.)		1,942,471.
Part X	Other Liabilities. See Form 990, Part X			
1.	(a) Description of liability	(b) Book value		merced the
(1) Fede	ral income taxes			
(2)	W		A THE PARTY OF THE	
(3)				
_(4)				
(5)				
(6)				
(7)			5 - = 5 T M	
(8)			10 10 10 10	
(9)				
(10)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)	>		
1				

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. X Schedule D (Form 990) 2012

61106

Schedule D (Form 990) 2012 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XI Total revenue, gains, and other support per audited financial statements 3,481,106. Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 135.593. 2b c Recoveries of prior year grants d Other (Describe in Part XIII.) 105,704. e Add lines 2a through 2d 20 241,297. 3 3 3,239,809. Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . 5 3,239,809. Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements
Amounts included on line 1 but not on Form 990, Part IX, line 25: 3,194,734. 1 a Donated services and use of facilities b Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) 2d 105,704. e Add lines 2a through 2d 105,704. 3,089,030. 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 3,089,030. 5 Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. SEE PAGE 5

Schedule D (Form 990) 2012

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.

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 X, QUESTION 2

ASC 740-10 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

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

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.

IN THE NORMAL COURSE OF BUSINESS, THE SOCIETY IS SUBJECT TO EXAMINATION BY THE FEDERAL AND STATE TAXING AUTHORITIES. IN GENERAL, THE SOCIETY IS NO LONGER SUBJECT TO TAX EXAMINATIONS FOR TAX YEARS ENDING BEFORE JUNE 30, 2010.

SCHEDULE D, PART XI, QUESTION 2D

RENTAL DEPRECIATION EXPENSE NETTED IN REVENUE: \$62,738

COST OF GOOD SOLD NETTED IN REVENUE: \$42,966

TOTAL \$105,704

SCHEDULE D, PART XII, QUESTION 2D

RENTAL DEPRECIATION EXPENSE NETTED IN REVENUE: \$62,738

COST OF GOOD SOLD NETTED IN REVENUE: \$42,966

\$105,704 TOTAL

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part I

Statement of Activities Outside the United States

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

For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

SOCIETY OF BIBLICAL LITERATURE

Employer identification number 23-6390716

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

					X Yes No
		ganization's pr	rocedures for monitoring	the use of its grants a	and other
Activities per Region, (The follow	ving Part I. line	3 table can be	duplicated if additional sp	ace is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, 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 for and investments In region
EUROPE			PROGRAM SERVICES	CONFERENCES	18,735.
71.					
			···- · <u>-</u>		<u> </u>
		<u> </u>			
Cub total					10.555
Total from continuation		_			18,735.
Totals (add lines 3a and 3b)					18,735.
	Grants or assistance? For grantmakers. Describe in assistance outside the United State Activities per Region. (The follow (a) Region EUROPE Sub-total	grants or assistance? For grantmakers. Describe in Part V the or assistance outside the United States. Activities per Region. (The following Part I, line (a) Region (b) Number of offices in the region EUROPE Sub-total. Total from continuation sheets to Part I.	grants or assistance? For grantmakers. Describe in Part V the organization's processing assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be offices in the region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents, and independent contractors in region (c) Number of employees, agents and independent contractors in region (c) Number of employees, agents and independent contract	grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional specifics in the region of offices in the region of contractors in region of the region of	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of organization in the contractors and independent of organization in the contractors in region (c) Number of organization (c

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

Schedule F (Form 990) 2012

Part II	Schedule F (Fe
irants and O	om 990) 2012
ther Assistance t	
o Organizations	
or Entities O	
utside the	
Unite	

4		Tar.
(a) Name of	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if	Grants and Other Assistance to Organizations of Frances Outside the Onited States. Com
(b) IRS code section and EIN	cipient who receive	ance to Organizati
(c) Region	ed more than \$5,000. F	IOUS OF CHANGE CHISIO
(d) Purpose of grant	Part II can be	ballun aul e
(e) Amount of cash grant	duplicated if addit	
(f) Manner of cash	onal space i	I the organ
(g) Amount of non-cash	s needed.	plete if the organization answered "Yes" to Form 990
(h) Description of non-cash		d Yes to F
(i) Method of valuation (book, FMV)		יטפע ווווס

(16)	(15)	(14)	(13)	(12)	(11)	(10)	(9)	(8)	(2)	(6)	(5)	4	(3)	(2)	(1)	-
																(a) Name of organization
												81				(b) IRS code section and EIN (if applicable)
								1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								(c) Region
													l	11		(d) Purpose of grant
											II				П	(e) Amount of cash grant
	ı															(f) Manner of cash disbursement
:																(g) Amount of non-cash assistance
					1		1=	=	ı							(h) Description of non-cash assistance
																(book, FMV, appraisa), other)

Lu		N
3 Enter total number of other organizations or entitles	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.	2 Enter total number of reciplent organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

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. Part III can be duplicated if additional space is needed.

Far	Part III can be duplicated it additional space is needed.	litional space is needed						
(a) Ty	(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)
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)				Н				
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

D	

Part	IV Foreign Forms		10 12 40	Market
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Ye	s X	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	s X	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	s X	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	s X	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	s X	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	s X	No

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

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

Department of the Treasury Internal Revenue Service Name of the organization

SOCIETY OF BIBLICAL LITERATURE

Employer identification number 23-6390716

Par	Questions Regarding Compensation		1	
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel 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)	11		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		ш	
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	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		х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:	ш		
a	The organization?	5a		Х
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
a	The organization?	6a		Х
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 Regulations 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		

Page 2

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

For each individual whose compensation must be reported 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

JOHN F KUTSKO (I) 1 EXECUTIVE DIRECTOR (II) 2 (II) (II)	98989	(i) Base compensation 129, 084.	(ii) Bonus & incentive compensation 2,000.	(iii) Other reportable compensation	other deferred compensation	17, 673.	(BXI)-(D)	reported as deferred in prior Form 990
JOHN F KUTSKO EXECUTIVE DIRECTOR	35353	129,084.			13,326.	17, 673.		
EXECUTIVE DIRECTOR		C						
	3 5 3							
	=							
	j :							
	⊜ :	1		_				
•	3 :							
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12	33		9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9					
3	3 3	1						
14	(ii) 							
	<u> </u>	A *						
3 6	33							

Schedule J (Form 990) 2012

Page 3

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCH. J LINE 7

A BONUS OF \$2,000 WAS PAID DURING THE YEAR AND HAS BEEN INCLUDED IN

COMPENSATION. THIS BONUS WAS NOT BASED ON REVENUE OR EARNINGS OF SBL.

Schedule J (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SOCIETY OF BIBLICAL LITERATURE

Employer identification number 23-6390716

FORM 990, PART III, QUESTION 4A

CONGRESSES - TWO MAJOR ANNUAL CONFERENCES ARE HELD EACH YEAR - ONE IN THE UNITED STATES AND ONE ABROAD, AS WELL AS REGIONAL MEETINGS WHICH ARE DISCUSSED BELOW. CONFERENCES ARE AN IMPORTANT VENUE FOR MEMBERS AS THEY PROVIDE OPPORTUNITIES FOR INTELLECTUAL AND PROFESSIONAL DEVELOPMENT, FACILITATING BROAD DISCUSSIONS, AND ENABLE MEMBERS TO COLLABORATE WITH MANY INSTITUTIONS AND ORGANIZATIONS. THEY PROVIDE AN OPPORTUNITY TO REACH A DIVERSE AUDIENCE AND IN MANY CASES RESOURCES ARE DEVELOPED AS A RESULT OF THESE CONFERENCES. THE CONFERENCE HELD IN THE US OFFERS EMPLOYERS AN OPPORTUNITY TO INTERVIEW PERSPECTIVE EMPLOYEES, AN OPPORTUNITY THAT ASSISTS OUR MEMBERS IN FINDING JOBS. A INDIVIDUAL MAY HAVE MULTIPLE JOB INTERVIEWS THAT WERE THIS BENEFIT NOT PROVIDED WOULD REQUIRE THEM TO BE ABLE TO TRAVEL TO EACH JOB LOCATION FOR AN INTERVIEW.

FORM 990, PART III, QUESTION 4C

PROFESSIONS - PROFESSIONS INCLUDE A BROAD RANGE OF ACTIVITIES THAT

SUPPORT PROFESSIONAL DEVELOPMENT, FACILITATE OPEN DISCUSSION, AND

ENCOURAGE THE SCHOLARLY STUDY OF THE BIBLE. SBL COLLABORATES WITH THE

NATIONAL HUMANITIES ALLIANCE AND AMERICAN COUNCIL OF LEARNED SOCIETIES;

ORGANIZATIONS THAT FUNCTION AS A CONSORTIUM FOR HUMANITIES ACTIVITIES. IN

ADDITION, SBL HAS ESTABLISHED PARTNERSHIPS WITH CONSORTIA OF COLLEGES,

UNIVERSITIES, AND SEMINARIES AS WELL AS WITH INDIVIDUAL HIGHER EDUCATION

INSTITUTIONS. CURRENTLY SBL HAS A GRANT FROM THE NATIONAL ENDOWMENT FOR

THE HUMANITIES (NEH) TO DEVELOP AN INTERACTIVE WEBSITE THAT WILL PROVIDE

AN ADDITIONAL TOOL FOR THE PUBLIC TO USE IN THEIR UNDERSTANDING OF THE BIBLE AND ITS CONTEXTS. THIS WEBSITE, BIBLE ODYSSEY, WILL SUPPORT AND FOSTER THE LARGE PUBLIC INTEREST IN MATTERS BIBLICAL AND WILL DRAW ON THE WORK OF SBL MEMBERS. IN A TIME OF ACADEMIC DEPARTMENTAL CUTBACKS, THIS IS AN OPPORTUNITY TO DEMONSTRATE TO THE PUBLIC THE VALUE TO SOCIETY THAT BIBLICAL SCHOLARS OFFER. BIBLE ODYSSEY IS SCHEDULED TO LAUNCH IN NOVEMBER 2013.

FORM 990, PART III, QUESTION 4D
OTHER PROGRAMS INCLUDE MEMBERSHIP, REGIONS, AND RESEARCH AND TECHNOLOGY.

MEMBERSHIP AND REGIONS - AS OF JUNE 30, 2013 THERE WERE 8,422 MEMBERS OF THE SOCIETY. MEMBERSHIP DUES 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 3,000 MEMBERS PARTICIPATE AS CHAIRS,

PRESENTERS, PRESIDERS, OR PANELISTS AT THE ELEVEN REGIONAL MEETINGS, THE INTERNATIONAL MEETING, AND THE ANNUAL MEETING; OVER 6,000 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 (SBL) 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 WORKED WITH THE TECHNOLOGY DEPARTMENT TO CONTINUALLY

CREATE BETTER ENVIRONMENTS FOR PROGRAM UNIT CHAIRS TO UTILIZE AND FOR

MEMBER REGISTRATION AND ONLINE SERVICES. THERE IS NOW AN IPHONE APP FOR

DOWNLOADING THE US ANNUAL MEETING PROGRAM BOOK AND SETTING UP A PERSONAL

CALENDAR SCHEDULE FOR THE EVENT. SBL'S TECHNOLOGY DEPARTMENT HAS DONE AN

AMAZING JOB OF STAYING AHEAD OF THE CURVE.

FORM 990, PART VI, SECTION A, QUESTIONS 6 & 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

BEHALF OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, QUESTION 11B

THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND FINANCE COMMITTEE

PRIOR TO FILING TO ENSURE THAT NO OBVIOUS MISTAKES OR MISSTATEMENTS

OCCUR. THE FORM 990 WILL BE PROVIDED TO THE BOARD BEFORE THE RETURN IS

FILED BY ONE OF TWO METHODS. EITHER IT WILL BE UPLOADED TO A WEBSITE THAT

ONLY THE BOARD HAS ACCESS TO OR THEY WILL BE SENT A PASSWORD PROTECTED

Employer identification number 23-6390716

ELECTRONIC COPY OF THE RETURN.

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

THE GOVERNING BODY IS REQUIRED TO COMPLETE A STATEMENT REGARDING CONFLICT

OF INTERESTS ON AN ANNUAL BASIS. LISTS OF STATEMENTS SENT OUT ARE

MAINTAINED AND CHECKED OFF AS THE STATEMENT IS RECEIVED. EACH STATEMENT

IS REVIEWED FOR CONFLICTS.

FORM 990, PART VI, SECTION B, QUESTION 15A SBL FOCUSES ON COMPARABLE NONPROFIT ORGANIZATIONS IN OUR AREA TO BENCHMARK PAY. IN ADDITION, MARKET INFORMATION FROM TWO ADDITIONAL MARKET SEGMENTS, PRIVATE FOUNDATIONS AND PUBLISHED NOT-FOR-PROFIT COMPENSATION SURVEYS MAY BE USED AS A SUPPLEMENT. WE ALSO COLLECT OTHER PUBLISHED SURVEY DATA, WHEN APPROPRIATE, FOR FOR-PROFIT ORGANIZATIONS FOR SPECIFIC FUNCTIONAL COMPETENCIES. DATA FROM THESE MARKET SEGMENTS ARE 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.

ATTACHMENT_1

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

THE OBJECT OF THE SOCIETY SHALL BE TO STIMULATE THE CRITICAL
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 8,500 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 AND REVISED OCTOBER 23, 2011.

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

23-6390716

ATTACHMENT 1 (CONT'D)

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

MISSION STATEMENT:

FOSTER BIBLICAL SCHOLARSHIP

STRATEGIC VISION STATEMENTS:

-ADVANCING ACADEMIC STUDY OF BIBLICAL TEXTS AND THEIR CONTEXTS AS
WELL AS OF THE TRADITIONS AND CONTEXTS OF BIBLICAL INTERPRETATION
-COLLABORATING WITH EDUCATIONAL INSTITUTIONS AND OTHER APPROPRIATE
ORGANIZATIONS TO SUPPORT BIBLICAL SCHOLARSHIP AND TEACHING
-DEVELOPING RESOURCES FOR DIVERSE AUDIENCES, INCLUDING STUDENTS,
RELIGIOUS COMMUNITIES, AND THE GENERAL PUBLIC
-FACILITATING BROAD AND OPEN DISCUSSION FROM A VARIETY OF CRITICAL
PERSPECTIVES

- -ORGANIZING CONGRESSES FOR SCHOLARLY EXCHANGE
- -PUBLISHING BIBLICAL SCHOLARSHIP
- -PROMOTING COOPERATION ACROSS GLOBAL BOUNDARIES

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICE	ES	ATTACHMENT	2
DESCRIPTION	GRANTS	EXPENSES	REVENUE
MEMBERSHIP		210,294.	636,016.
RESEARCH AND TECHNOLOGY		162,276.	
REGIONS		128,821.	11,787.
TOTALS	•	501,391.	647,803.

Schedule O (Form 990 or 990-EZ) 2012				Page 2
Name of the organization			Employer identification	number
SOCIETY OF BIBLICAL LITERATURE			23-6390716	
		· ·	ATTACHMENT 3	
FORM 990, PART VIII - INVESTMENT INCOME	<u> </u>			
	(A)	(B)	(C)	(D)
	TOTAL	RELATED OR	UNRELATED	EXCLUDED
DESCRIPTION	REVENUE	EXEMPT REVENUE	BUSINESS REV.	REVENUE
INTEREST INCOME	1,65	8.		1,658.
DIVIDEND INCOME	61,89	7.		61,897.
TOTALS	63,55	5.		63,555.
		-	ATTACHMENT 4	
FORM 990, PART VIII - GROSS SALES AND C	OST OF GOO	DS SOLD		
GROSS SALES LESS RETURNS AND ALLOWANCES			465,265.	
INVENTORY AT BEGINNING OF YEAR		• • • • • • • • • • • • • •	45,455.	
PURCHASES		• • • • • • • • • • • • • •		
SALARIES AND WAGES	• • • • • • • • •			

GROSS SALES LESS RETURN	S AND ALLOWANCES		465,265.	
INVENTORY AT BEGINNING	OF YEAR		45,455.	
PURCHASES		• • • • • • • •		
SALARIES AND WAGES		• • • • • • • •		
OTHER COSTS		• • • • • • •	40,474.	
SUBTOTAL			85,929.	
MINUS ENDING INVENTORY			42,963.	
COST OF GOODS SOLD		<u> </u>	42,966.	
		ATTAC	HMENT 5	
				
FORM 990, PART X - PREP	AID EXPENSES AND DEFERRED CHARGE	ES		
			ENDING	
DESCRIPTION			BOOK VALUE	
PREPAID EXPENSES			22,230.	
	TOTALS	_	22,230.	

DESCRIPTION	BOOK VALUE
PREPAID EXPENSES	22,230.
TOTALS	22,230.

ATTACHMENT 6	
The second second second	

Schedule O (Form 990 or 990-EZ) 2012 Page 2 **Employer Identification number** Name of the organization SOCIETY OF BIBLICAL LITERATURE 23-6390716 ATTACHMENT 6 (CONT'D) FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES COST ENDING DESCRIPTION BOOK VALUE OR FMV CORPORATE STOCKS 403,778. **FMV** MUTUAL FUNDS & ETF'S 1,210,682. FMV

TOTALS 1,614,460.

FORM 990, PART X - DEFERRED REVENUE

DESCRIPTION ENDING
BOOK VALUE

DEFERRED REVENUE 1,365,667.

TOTALS _____1,365,667.

FMV

EQUITY SECURITIES

RENT AND ROYALTY INCOME

Taxpayer's Name SOCIETY OF BIBLI	ראן ודייביסאיי	מסווים			-	1			ing Number 0716
DESCRIPTION OF PROPERTY	.CAL_LLIERA:	UKE	-					-059	0/10
RENTAL BUILDING									
	ctively participate in th	e operation	of the ac	tivity c	during the tax year?				
TYPE OF PROPERTY:						<u> </u>			
REAL RENTAL INCO	OME								
OTHER INCOME:			_ · ·						
RENTAL BUILDING						12	2,50	0.	
				•					
TOTAL GROSS INCOME									122,500.
OTHER EXPENSES:						10			
SEE ATTACHMENT									
UX.					· ·				
								_	
	***					PW III			
DEPRECIATION (SHOWN BELOW)					62.	738.			
LESS: Beneficiary's Portion									
AMORTIZATION					`				
DEPLETION									
LESS: Beneficiary's Portion							П		
TOTAL EXPENSES									163,168.
TOTAL RENT OR ROYALTY INCOME									-40,668.
Less Amount to									
Rent or Royalty									
Depreciation									
Depletion									
Investment Interest Expense									
Other Expenses									
Net Income (Loss) to Others		-				· · · · · · · · · · · · · · · · · · · 		_	
Net Rent or Royalty Income (Loss)								`	-40,668.
Deductible Rental Loss (if Applicable						<u> </u>		-	
SCHEDULE FOR DEPRECIAT	ION CLAIMED								·
									-
	(b) Cost or	(c) Date	(d)	(e)	(f) Basis for	(g) Depreciation	(h)	(i) Life	(j) Depreciation
(a) Description of property	unadjusted basis	acquired	ACRS des.	Bus.	depreciation	in orios voces	Method	or rate	for this year
SEE_ATTACHMENT			ues.	79		prior years		1816	
-									
·									
						-			-
							·		
Totals									
			~ . v . v . v			 			

JSA

2E7000 1.000

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

OTHER INCOME

RENTAL BUILDING		22,500.
OTHER DEDUCTIONS INSURANCE LEGAL AND OTHER PROFESSIONAL REPAIRS UTILITIES WAGES	5	3,284. 384. 51,559. 37,773. 7,430.

RENT AND ROYALTY SUMMARY

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET <u>INCOME</u>
RENTAL BUILDING	122,500.	62,738.	100,430.	-40,668.
TOTALS	122,500.	62,738.	100,430.	-40,668.

SCHEDULE D (Form 1041)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

Information about Schedule D (Form 1041) and its separate instructions is at

www.irs.gov/form1041.

OMB No. 1545-0092

2012

Name of estate or trust Employer identification number 23-6390716 SOCIETY OF BIBLICAL LITERATURE Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (Example: 100 shares 7% preferred of "Z" Co.) (b) Date acquired (c) Date sold (e) Cost or other basis the entire year Subtract (e) from (d) (d) Sales price (mo., day, yr.) (see instructions) (mo., day, yr.) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b **1b** Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2011 Capital Loss Carryover Worksheet

Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, 5 Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (f) Gain or (loss) for (c) Date sold (a) Description of property (Example: 100 shares 7% preferred of "Z" Co.) (b) Date acquired (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (see instructions) (mo., day, yr.) (mo., day, yr.) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 18,335. 6Ь Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2011 Capital Loss Carryover Worksheet 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, 18,335.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2012

Schedule D (Form 1041) 2012			Page 2
Part III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	(3) Total
Caution: Read the instructions before completing this part.	(see instr.)	or trust's	(5) 10141
Net short-term gain or (loss) 13			
4 Net long-term gain or (loss):			
a Total for year			18,335.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.) 14b			
c 28% rate gain14c			
5 Total net gain or (loss). Combine lines 13 and 14a ▶ 15			18,335.
lote: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fon ains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss,	n 990-T, Part I, line 4	a). If lines 14a and 1 I the Canital Loss C	5, column (2), are ne emnover Worksheet s
ecessary.	Complete Fait 14 and	- (10 Capital 2000 C	
Part IV Capital Loss Limitation			
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, lin	e 4c, if a trust), the sm	naller of:	
a The loss on line 15, column (3) or b \$3,000	V. 100 V. C. 1 600	16 (
a The loss on line 15, column (3) or b \$3,000 lote: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, oss Carryover Worksheet in the instructions to figure your capital loss carryover.	line 22 (or Form 990	-1, line 34), is a loss	, сотрівів іле Сарі ї
Part V Tax Computation Using Maximum Capital Gains Rates		<u></u>	-
orm 1041 filers. Complete this part only if both lines 14a and 15 in column (2	!) are gains, or an ar	mount is entered in	Part I or Part II an
nere is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than			
aution: Skip this part and complete the Schedule D Tax Worksheet in the instruct	ions if:		
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or			
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.			
orm 990-T trusts. Complete this part only if both lines 14a and 15 are gain			
f Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and co	mplete the Schedul	e D Tax Workshee	et in the instruction
either line 14b, col. (2) or line 14c, col. (2) is more than zero.	114	- 1 -	
7 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	. 17		
8 Enter the smaller of line 14a or 15 in column (2)	3	. 10	
but not less than zero		100	
9 Enter the estate's or trust's qualified dividends			
from Form 1041, line 2b(2) (or enter the qualified		177	
dividends included in Income in Part I of Form 990-T) 19			
0 Add lines 18 and 19			
1 If the estate or trust is filing Form 4952, enter the			
amount from line 4g; otherwise, enter -0 ▶ 21			
2 Subtract line 21 from line 20. If zero or less, enter -0	. 22		
3 Subtract line 22 from line 17. If zero or less, enter -0-	23		
4 Enter the smaller of the amount on line 17 or \$2,400	24		
5 Is the amount on line 23 equal to or more than the amount on line 24?			
Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.			
No. Enter the amount from line 23	25		
6 Subtract line 25 from line 24			
7 Are the amounts on lines 22 and 26 the same?			
Yes, Skip lines 27 thru 30; go to line 31. No. Enter the smaller of line 17 or line 22	27		
8 Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
9 Subtract line 28 from line 27	29		
0 Multiply line 29 by 15% (.15)	•	30	
1 Figure the tax on the amount on line 23. Use the 2012 Tax Rate Sche	dule for Estates an		
(see the Schedule Ginstructions in the instructions for Form 1041)			
2 Add lines 30 and 31		32	
Figure the tax on the amount on line 17. Use the 2012 Tax Rate Sche	dule for Estates an		
(see the Schedule Ginstructions in the instructions for Form 1041)			
4 Tax on all taxable income. Enter the smaller of line 32 or line 33 here as			
G line 12 /or Form 990-T line 36)	want will to the	34	

Schedule D (Form 1041) 2012

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side. Employer identification number SOCIETY OF BIBLICAL LITERATURE 23-6390716

Part II Long-Term Capital Gains : (a) Description of property (Example: 100 sh. 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a CHARLES SCHWAB	VAR	VAR	868,020.	852,784.	15,236
TIAA-CREF LUCE	VAR	VAR	44,986.	41,887.	3,099
		like i i = ==			
- -					
			_ =		
				HE E	
		1- 1-			
	-				
	20 = 11				
	_	-		П	
	181			-	***
1	1		10.0		
		= 11 4			
					·
Sb Total. Combine the amounts in colum		<u> </u>			18,335.

Form 4797

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) 20**12**

Department of the Treasury Internal Revenue Service ► Attach to your tax return.

► Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.

Attachment Sequence No. 27

Form 4797 (2012)

identifying number Name(s) shown on return 23-6390716 SOCIETY OF BIBLICAL LITERATURE Enter the gross proceeds from sales or exchanges reported to you for 2012 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)........... Part 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) (c) Date sold (d) Gross 2 (a) Description (b) Date acquired allowed or basis, plus Subtract (f) from the allowable since improvements and of property (mo., day, yr.) (mo., day, yr.) sales price sum of (d) and (e) acquisition expense of sale ATTACHMENT 3 Gain, If any, from Form 4684, line 39 3 4 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 5 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 6 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: 7 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. 20,351. 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 Part II Ordinary Gains and Losses (see instructions) 10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 Gain, if any, from line 31 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 18 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 35, 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, line 14

For Paperwork Reduction Act Notice, see separate instructions.

rm 4797 (2012) Part III Gain From Disposition of Property	Und	der Sections 124	5, 1250, 125		6390716 54, and 1255	Pag
(see instructions) (a) Description of section 1245, 1250, 1252, 1254, o	or 125	55 property:		<u> </u>	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
The H					(110., 40), 11.7	(mai, day, ju)
					1 1 1	
					1 1 1	
. 11						, 11
These columns relate to the properties on lines 19A through 19D.	. ▶	Property A	Property	В	Property C	Property D
	20					
· ·	21					
Depreciation (or depletion) allowed or allowable	22					
· · · · · · · · · · · · · · · · · · ·	23					
Total gain. Subtract line 23 from line 20	24					
If section 1245 property:						
a Depreciation allowed or allowable from line 22	25a					
	25b					
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					
Subtract line 26a from line 24. If residential rental property						
or line 24 is not more than line 26a, skip lines 26d and 26e . 2	26c					
Additional depreciation after 1969 and before 1976.	26d					
Enter the smaller of line 26c or 26d	26e					
F Section 291 amount (corporations only)	26f					
g Add lines 26b, 26e, and 26f	26g					
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).						ļ,
	27a					
b Line 27a multiplied by applicable percentage (see instructions).	$\overline{}$					
Enter the smaller of line 24 or 27b	27c					
If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions).	28a				100	ii
Enter the smaller of line 24 or 28a	28b	į				
If section 1255 property:		1/2				
Applicable percentage of payments excluded from						
income under section 126 (see instructions)	29a					
b Enter the smaller of line 24 or 29a (see instructions).	29b					
mmary of Part III Gains. Complete property		lumns A through	D through lin	e 29b	before going to lin	e 30.
Total gains for all properties. Add property columns A Add property columns A through D, lines 25b, 26g, 27	throu	igh D, line 24	re and on line 13	• • •	30	
Subtract line 31 from line 30. Enter the portion from other than casualty or theft on Form 4797, line 6	Casi	ualty or theft on Form	4684, line 33.	Enter	the portion from	
rt IV Recapture Amounts Under Sections (see instructions)						or Less
The state of the s					(a) Section 179	(b) Section 280F(b)(2)
Section 179 expense deduction or depreciation allows	able ii	n prior years		33		
Recomputed depreciation (see instructions)				34		-
Recomputed depreciation (see instructions)						

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	9.750	9.750.		VAR	VAR		COMPUTERS
for enlire year	Cost or Other Basis	or Allowable	Price	Sold	Acquired	Description	DC.
)						

Form 990-T	Exemi	pt Organization Business In	com	e Tax Return (a	nd proxy	tax under sec	tion 6033(a))		lo. 1545-0687	
		For calendar year 2012 or other tax ye						2	012	
Department of the Treasury Internal Revenue Service		ending 06/30,2013	3.	► See :	eparate l	nstructions.		Open to P 501(c)(3) (ublic Inspection for Organizations Only	
A Check box if address changed		Name of organization (Check be	ox if na	ne changed and see	Instruction	s.)			etion number	
B Exempt under section	1	SOCIETY OF BIBLICAL	LIT	ERATURE						
X 501(C x 3)	Print	Number, street, and room or suite no.	fa P.O	. box, see instructions	B.		23-	6390716		
408(e) 220(e)	or Type							E Unrelated business activity codes		
408A 530(a	13 he	825 HOUSTON MILL RO	AD N	E = III I		350	(200	instructions.)		
529(a)		City or town, state, and ZIP code					_			
C Book value of all assets		ATLANTA, GA 30329								
at end of year	F Gro	up exemption number (see instructi	ons)	-				/ -		
5,321,895.	G Che	ock organization type 🕨 X 501	(c) co	rporation	501(c) trust	401(a) trust	Other trust	
H Describe the organi	zation's p	rimary unrelated business activity.	<u> </u>				DILLINY.	1011	WILLISS	
I During the tax year,	was the	corporation a subsidiary in an affili	ated g	roup or a parent-su	bsidiary i	controlled grou	ıp?	▶∟	Yes X No	
		identifying number of the parent co	rporati				- 0		- 1	
J The books are in car	e of 🕨	SUSAN MADARA			<u>Felephor</u>	e number 🕨	404-72	7-3103		
Part Unrelated	Trade o	or Business Income		(A) Incom	0	(B) Ex	penses	11.5	(C) Net	
1a Gross receipts or	sales							13.174		
b Less returns and allow	_	c Balance						I I I I I		
2 Cost of goods so	ld (Sched	ule A, line 7)	2						L 0	
•		2 from line 1c	3			Ш=			- 0	
4a Capital gain net i	ncome (a	ttach Schedule D)	4a			_ 4_0				
		Part II, line 17) (attach Form 4797)	4b							
		rusts	4c							
		ps and S corporations (attach statement)								
			6							
		come (Schedule E)	7							
		ies, and rents from controlled	l .							
			8					_		
		section 501(c)(7), (9), or (17)	l .					_		
			9							
	_	ncome (Schedule I)	10							
		fule J) , ,				Contract				
_ '		tions; attach statement)			0			100	100011110	
		ough 12	13	ne for limitation		eductions)	/avcent i	or contrib	utione	
		be directly connected with t				,	(except i	OI COITHID	uuons,	
		directors, and trustees (Schedule K)					14			
		directors, and nustees (Schedule N)								
_										
•										
		ee instructions for limitation rules)								
		4562)		1					*.*	
		on Schedule A and elsewhere on re					22	b		
· ·										
		compensation plans								
26 Excess exempt ex	penses (S	Schedule I)				101.	.0 126			
27 Excess readership	costs (S	chedule J)				20	27			
		statement)								
		s 14 through 28								
		e income before net operating loss								
31 Net operating los	s deducti	on (limited to the amount on line 30))				31			
32 Unrelated busine	ss taxable	e income before specific deduction	. Subt	ract line 31 from lin	e 30 .		32			
33 Specific deduction	n (genera	ally \$1,000, but see line 33 instruct	ions fo	or exceptions)			33			
		le income. Subtract line 33 from lir	ne 32.	If line 33 is greate	r than lin	e 32,				
enter the smaller	of zero o	line 32					34		C	

_	t III Tax Computation	_	- 0.0	
35	Organizations taxable as corporations (see instructions for tax computation). Controlled group			
	members (sections 1561 and 1563) check here - See Instructions and:			
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):			
	(1) \$ (2) \$ (3) \$			
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)\$	_		
	(2) Additional 3% tax (not more than \$100,000)	HILL		
c	Income tax on the amount on line 34	35c		
36	Trusts taxable at trust rates (see instructions for tax computation). Income tax on			
	the amount on line 34 from: Tax rate schedule or Schedule D (Form 1041)	36		
37	Proxy tax (see instructions)	37_		
38	Alternative minimum tax	38		
39	Total. Add lines 37 and 38 to line 35c or 36, whichever applies	39		
Par	t IV Tax and Payments			
40 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a	1		
b	Other credits (see instructions) 40b]		
C	General business credit. Attach Form 3800 (see instructions) 40c	10.10		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)			
•	Total credits. Add lines 40a through 40d	40e		
41	Subtract line 40e from line 39,	41		
42	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach statement),	42		
43	Total tax. Add lines 41 and 42	43		0
44 a	Payments: A 2011 overpayment credited to 2012	1		
b	2012 estimated tax payments	_		
c	Tax deposited with Form 8868	72		
d	Foreign organizations: Tax paid or withheld at source (see instructions) 44d	_		
	Backup withholding (see instructions)			
f	Credit for small employer health insurance premiums (Attach Form 8941) 44f			
9	Other credits and payments: Form 2439			
	Form 4136 Other Total ▶ 44g	_		
45	Total payments. Add lines 44a through 44g	45		
46	Estimated tax penalty (see instructions). Check if Form 2220 is attached	46		
47	Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed			
48		47		
49	Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	\rightarrow		
	Enter the amount of line 48 you want: Credited to 2013 estimated tax Refunded	48		
Par	Enter the amount of line 48 you want: Credited to 2013 estimated tax Refunded TV Statements Regarding Certain Activities and Other Information (see instruction)	48 49		
Par 1	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Refunded ** **Total Control of Line 48 you want: Credited to 2013 estimated tax **Refunded ** **Total Control of Line 48 you want: Credited to 2013 estimated tax **Refunded ** **Refunded ** **Refunded ** **Total Control of Line 48 you want: Credited to 2013 estimated tax **Refunded ** **Refunded ** **Refunded ** **Refunded ** **Refunded ** **Refunded ** **Aunt	48 49 ns)		Yes No
	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Refunded** **V** **Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authorist account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1	48 49 ns)		
	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Refunded** **V** **Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authorist account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	48 49 ns) ty over 8	of Foreign	x_
	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Refunded** **V** **Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authority account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here **During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign country to the stax year.	48 49 ns) ty over 8	of Foreign	
1	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Refunded** **Refunded** **V** **Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authority account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here **During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign accountry in the instructions for other forms the organization may have to file.	48 49 ns) ty over 8	of Foreign	x_
2	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Refunded** **Refunded** **V** **Statements Regarding Certain Activities and Other Information (see Instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authority account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here **During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign type of the instructions for other forms the organization may have to file. **Enter the amount of tax-exempt interest received or accrued during the tax year**	48 49 ns) ty over 8	of Foreign	x_
1 2 3 Sch	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Refunded** **To Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authorist account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here **During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign the tax year, see instructions for other forms the organization may have to file. **Enter the amount of tax-exempt interest received or accrued during the tax year **\$ **Sedule A - Cost of Goods Sold.** Enter method of inventory valuation **	48 49 ns) ty over a , Report	of Foreign	x_
2 3 Sch	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Refunded** **V** **Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authorist account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here **During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign "Yes," see instructions for other forms the organization may have to file. **Enter the amount of tax-exempt interest received or accrued during the tax year ** **edule A - Cost of Goods Sold.** Enter method of inventory valuation ** Inventory at beginning of year 1	48 49 ns) ty over 8	of Foreign	x_
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3 Sch 1 2 3 4 a	Enter the amount of line 48 you want: Credited to 2013 estimated tax **Negarding Certain Activities and Other Information** (see Instruction** At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authority account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign account of the forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$ edule A - Cost of Goods Sold. Enter method of inventory valuation Inventory at beginning of year. Purchases	48 49 19 19 19 19 19 19 19 19 19 19 19 19 19	spect to	X X
1 2 3 Sch 1 2 3 4 a b 5	Enter the amount of line 48 you want: Credited to 2013 estimated tax Statements Regarding Certain Activities and Other Information (see Instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authorise account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore if "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Secule A - Cost of Goods Sold. Enter method of inventory valuation Inventory at beginning of year 1	48 49 49 1s) ty over a Report sign trus for my kn lay the	spect to e) apply awledge and be	Yes No X this return
3 Sch 1 2 3 4 a	Enter the amount of line 48 you want: Credited to 2013 estimated tax Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authoricacount (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore if "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Sedule A - Cost of Goods Sold. Enter method of inventory valuation Inventory at beginning of year Purchases Cost of labor 3 6 Inventory at end of year 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Additional section 263A costs (attach statement) 4a 8 Do the rules of section 263A (we property produced or acquired for to the organization? Under panalties of perjury, because that I have examined this return, including accompanying schedules and statements, and to the best correct, and complete. Declaration Orepara (or for than taxpayer) is based on all information of which preparer has any knowledge.	48 49 as) ty over a, Report eign trus 6 7 with re resale of my kn lay the eith the	spect to e) apply owledge and be	Yes No X this return below
1 2 3 Sch 1 2 3 4 a b 5	Enter the amount of line 48 you want: Credited to 2013 estimated tax Statements Regarding Certain Activities and Other Information (see Instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authoric account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore if "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Secule A - Cost of Goods Sold. Enter method of inventory valuation Inventory at beginning of year Purchases 2 6 Inventory at end of year 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Additional section 263A costs (attach statement) 4a Boo the rules of section 263A (v property produced or acquired for to the post organization? Under penalties of perjury, declare that I have examined this return, including accompanying schedules and statements, and to the best correct, and complete. Declaration if prepare to the nataxpayer) is based on all information of which preparer has any knowledge. Property produced or acquired for to the post property produced or acquired for the post property produced property has any knowledge. Property produced property has any knowledge.	48 49 1S) by over 6 Report sign trus 6 7 vith re resale of my kn lay the elith the	spect to e) apply awledge and be IRS discuss preparer sho lons)? X Yes	Yes No X this return below
1 2 3 Sch 1 2 3 4 a b 5	Enter the amount of line 48 you want: Credited to 2013 estimated tax Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authoric account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore if "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Secule A - Cost of Goods Sold. Enter method of inventory valuation Inventory at beginning of year	48 49 1S) by over a graph of the second my known the second my kno	spect to e) apply awledge and be IRS discuss preparer sho lons)? X Yes	Yes No X Stief, it is true. this return below the No.
1 2 3 Sch 1 2 3 4 a b 5 Sigr Here	Enter the amount of line 48 you want: Credited to 2013 estimated tax Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authorise account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts, If "Yes," enter the name of the foreign country here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign country here but the amount of tax-exempt interest received or accrued during the tax year see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year seedule A - Cost of Goods Sold. Enter method of inventory valuation late and the foreign country at end of year. Purchases 2 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2. Additional section 263A costs (attach statement). 4a 8 Do the rules of section 263A (we property produced or acquired for to the organization? Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best correct, and complete. Declaration for preparal (offer than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer Date Title Print/Type preparer's name Preparer's signature Date Chemical	48 49 1S) by over 6 Report sign trus 6 7 vith re resald of my kn lay the ith the ee instruct ck ide	spect to e) apply awiedge and be IRS discuss preparer sho lons)? X Yes	Yes No X Xiief, it is true. this return below a No.
3 Sch 1 2 3 4 a b 5 Sigr Here	Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authoris account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1 Bank and Financial Accounts. If "Yes," enter the name of the foreign country here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore if "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$ edule A - Cost of Goods Sold. Enter method of inventory valuation Inventory at beginning of year 1 6 Inventory at end of year Purchases 2 7 Cost of goods sold. Subtract line Cost of labor 3 8 Do the rules of section 263A (we property produced or acquired for to the organization? Under panalties of perjury, Indectare that I have examined this return, including accompanying schedules and statements, and to the best correct, and complete. Declaration if prepare (or pr than taxpayer) is based on all information of which preparer has any knowledge. Print/Type preparer's name Preparer's signature MARC AZAR Pirm's name SMITH & HOWARD, P.C. Firm's name	48 49 1S) by over a graph of the second my known the second my kno	spect to e) apply awledge and be IRS discuss preparer sho lons)? X Yes	Yes No X Wilef, it is true. this return below is No. 6804

716 Page 3
1 2,00
d with the income th statement)
flocable to
r deductions statement)
le deductions total of columns and 3(b))
and on page 1, 7, column (B).
Deductions directly
in column 5
1
d with income in clumn 10

Schedule C - Rent Income (see instructions)	e (From Real Prope	rty a	nd Personal Prop	erty	Leased Wi	th Real Prope	erty)		
1. Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent received or	accru	ed						
(a) From personal property (if the for personal property is more then more than 50%)	nan 10% but not p	ercent	from real and personal pro age of rent for personal pro rif the rent is based on pr	ореп	y exceeds			nected with the income (attach statement)	
(1)									
(2)									
(3)									
(4)									
Total	Total								
·	, , , , , ,					(b) Total deducti	ons.		
(c) Total income. Add totals of c						Enter here and o			
here and on page 1, Part I, line 6						Part I, line 6, colu	1WU (R) 🕨	•	
Schedule E - Unrelated D	ebt-Financed Incom	e (se	e instructions)						
			2. Gross Income from		3. De	ductions directly co	onnected w sced propert		
1. Description of del	1. Description of debt-financed property		allocable to debt-finan	bec	(a) Straight	ine depreciation	(b) Other deductions		
	property				attach statement)		(attach statement)		
(1)			- N - 11 - 11 - 11 - 11	ШЭ			117		
(2)									
(3)									
(4)									
A. Amount of average acquisition debt on or allocable to debt-financed property (attach statement)	5. Average adjusted bat of or allocable to debt-financed propert (attach statement)		6. Column 4 divided by column 5					. Allocable deductions umn 6 x total of columns 3(a) and 3(b))	
	(attach statement)								
(1)			<u> </u>	%					
(2)				%					
(3)				%					
(4)			İ	%					
Totals	Tim Tan		- 111-11-11	•	Part I, line	and on page 1, 7, column (A).		ere and on page 1, line 7, column (B).	
Total dividends-received deduct	ions included in column	8				▶			
Schedule F - Interest, Ani							uctions)		
		_	kempt Controlled Or						
1. Name of controlled organization	2. Employer Identification number		3. Net unrelated income (loss) (see instructions)	4. T	otal of specified syments made	5. Part of column included in the c organization's gro	controlling	6. Deductions directly connected with income in column 5	
(1)									
(2)									
(3)	T**								
(4)		\top							
Nonexempt Controlled Organ	nizations			_		10.1			
7. Taxable Income	8. Net unrelated incom (loss) (see instructions		9. Total of specifi payments made		include	t of column 9 that is ed in the controlling ation's gross income	cor	I. Deductions directly inected with income in column 10	
(1)			L-L-L-R/L					V6 E 1	
							_		
(3)	11.		-						
(4)			1					Id 1: 0 - 1:55	
					Enter t	columns 5 and 10. iere and on page 1, line 8, column (A).	e Ent	id columns 6 and 11, ter here and on page 1, rt I, line 8, column (B).	
Totals		<u></u>						Form 990-T (201)	

Schedule G - Investment I	All and the little		3. Deductions directly connected	4. Se	5. Total deductions and set-asides (col. 3	
1. Description of income	2. Amount of	Income	(attach statement)	(attach :	statement)	plus col. 4)
(1)						
(2)						
(3)						
(4)						
	Enter here and o					Enter here and on page 1 Part I, line 9, column (B).
Totals ▶						
Schedule I - Exploited Ex	empt Activity Inc	come, Other Th	an Advertising In	come (see instru	ctions)	,
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross Income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
	1					_
(2)		<u> </u>				_
(3)	-					
(4)	Enter here and on	Enter here and on				Enter here and
	page 1, Part I, line 10, col. (A).	page 1, Part I, line 10, col. (B).				on page 1. Part II, line 26.
Totals		41				
Schedule J - Advertising I						
Part I Income From Per	iodicals Report	ed on a Consoli	idated Basis			
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 cots. 5 through 7.		6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)	-					
<u> </u>						
Part II Income From Per through 7 on a lin	riodicals Report	ed on a Separa	te Basis (For ea	ch periodical list	ed in Part II, fi	Il in columns 2
			4. Advertising			7. Excess readership
1. Name of periodical	2. Gross advertising Income	3. Direct advertising costs	gain or (loss) (col. 2 minus col. 3). If a gain, compute	5. Circulation Income	6. Readership costs	costs (column 6 minus column 5, but not more than column 4).
			cols. 5 through 7.			
(1)					8	
(1)						,
(2)						
(2)						
(2) (3) (4)						
(2) (3) (4) Totals from Part I	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I line 11, col. (B).				Enter here and on page 1, Part II, line 27.
(2) (3) (4) Totals from Part I Totals, Part II (lines 1-5)	page 1, Part I, line 11, col. (A).	page 1, Part I line 11, col. (B).	cols. 5 through 7.			Enter here and on page 1,
(2) (3) (4) Totals from Part I	page 1, Part I, line 11, col. (A).	page 1, Part I line 11, col. (B).	cols. 5 through 7.	uctions)		Enter here and on page 1,
(2) (3) (4) Totals from Part I Totals, Part II (lines 1-5)	page 1, Part I, line 11, col. (A).	page 1, Part I line 11, col. (B).	cols. 5 through 7.	3. Percent of time devoted to business	_ 4. Comps	Enter here and on page 1,
(2) (3) (4) Totals from Part I Totals, Part II (lines 1-5) Schedule K - Compensation	page 1, Part I, line 11, col. (A).	page 1, Part I line 11, col. (B).	cols. 5 through 7.	3. Percent of time devoted t	_ 4. Comps	Enter here and on page 1, Part II, line 27.
(2) (3) (4) Totals from Part I Totals, Part II (lines 1-5) Schedule K - Compensation 1. Name	page 1, Part I, line 11, col. (A).	page 1, Part I line 11, col. (B).	cols. 5 through 7.	3. Percent of time devoted t	a. Compe	Enter here and on page 1, Part II, line 27.
(2) (3) (4) Totals from Part I Totals, Part II (lines 1-5) Schedule K - Compensation 1. Name (1) (2)	page 1, Part I, line 11, col. (A).	page 1, Part I line 11, col. (B).	cols. 5 through 7.	3. Percent of time devoted t	%	Enter here and on page 1, Part II, line 27.
(2) (3) (4) Totals from Part I Totals, Part II (lines 1-5) Schedule K - Compensation 1. Name	page 1, Part I, line 11, col. (A).	page 1, Part I line 11, col. (B).	cols. 5 through 7.	3. Percent of time devoted t	%	Enter here and on page 1, Part II, line 27.

INSTRUCTIONS FOR FILING SOCIETY OF BIBLICAL LITERATURE GA FORM 600T GEORGIA 600T - EXEMPT ORG. UNRELATED BUS. INC. TAX FOR THE PERIOD ENDED JUNE 30, 2013

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 15, 2014 WITH...

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

Georgia Form 600-T (Rev. 8/12) Exempt Organization Unrelated Business Income Tax Return

Signature of Officer



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

OU.	X 140331	
a,	Georgia	30374-0397

Page 1 Amended due to IRS changes | Address Change | UET Annualization Exception attached Amended Exempt Organization Unrelated Business Income Tax Return (Under Georgia Code Section 48-7-25) 20 12 , 20 _1_2 For the taxable year beginning 07/01 and ending 06/30 , 20 13 Name of Organization Name of Fiduciary Federal Employer ID No. (in case of employees' trust described in section 401 (a) and exempt under Society of Biblical Literature section 501 (a), Insert the trust's identification number. Number and Street Number and Street 825 Houston Mill Road NE 23-6390716 IRS code section for which you are Date of current exemption letter. City or Town City or Town **NAICS Code** exempt. Se¢.501 Atlanta C)(3 State State Zip Code Zip Code 30329 GA **SCHEDULE 1** 1. Unrelated business taxable income from Federal Form 990-T (attach copy) 2. 3. 4. 5. 5. Georgia unrelated business taxable income (line 3 less line 4). COMPUTATION OF GEORGIA UNRELATED BUSINESS INCOME TAX **SCHEDULE 2** 2. 3. Withholding Credits (G-2A, G-2LP and/or G-2RP)- 3. 4. 5. Interest due (see instructions)........ 5. 6. 7. 8. 9. If line 4 is an overpayment, amount to be credited on 20 13 Estimated Tax ▶ Refunded ▶ A COPY OF THE FEDERAL 990 T AND SUPPORTING SCHEDULES (AND ANY EXTENSION) MUST BE ATTACHED TO THIS RETURN. DECLARATION: I/We declare, under penalty of perjury that I/we have examined this return (including accompanying schedules and statements) and to the best of our knowledge and belief it is true, correct and complete. If prepared by a person other than a taxpayer, his/her declaration is based on all informa-SMITH & HOWARD, P.C. tion of which s/he has

Executive Director 2/3/2014 P00746804

Title Employee ID or Social Security Number

2J1210 1099 YS 35 9242 2/3/2014 11:05:07 A V 12-7.12 61106

Signature of Individual or Firm Preparing Return

	990-T	Evami	ot Organization Business	Incom	e Tay Return (-	-d	tor males and	e022/-W	OMBI	No. 1545-0687
Form	330-1		For calendar year 2012 or other ta						2	012
	nent of the Treasury Revenue Service		ending 06/30,20	13 .			nstructions.	anu	Open to P	ublic Inspection for Organizations Only
A	Check box if		Name of organization (Check		me changed and see i	nstruction	s.)		loyer identifi	cation number
	address changed							(Emp	loyees' trust, se	e instructions.)
	npt under section		SOCIETY OF BIBLICA	L LIT	ERATURE					
X	501(C)(3)	Print or	Number, street, and room or suite n	o. If a P.C). box, see instructions				390716	
4	108(e) 220(e)	Туре			_				lated busine nstructions.)	ss activity codes
\vdash	108A530(a)		825 HOUSTON MILL F	ROAD N	IE .		350	_ ` '		
	529(a) value of all assets		City or town, state, and ZIP code							
	id of year	F Gro	ATLANTA, GA 30329							
	5 321 895		up exemption number (see instruction) ck organization type X 5			E04/-	\	401(a)	\ ém uné	Other trust
			rimary unrelated business activity		i poration	1 30 1(0) trust		uust	Other dust
			corporation a subsidiary in an a		roun or a narent-sul	hsidiary (controlled are	un?		Yes X No
	-		identifying number of the parent	_		osididi y i	zona onoa gro	ирг		
			SUSAN MADARA	оо. ро. о		Telephor	e number ►	404-72	7-3103	
			or Business Income		(A) Income			penses		(C) Net
	Gross receipts or s						XIII			
ь	Less returns and allows	nces	¢ Balance	▶ 1c						
2	Cost of goods sol	d (Schede	ule A, line 7)	. 2						
3	Gross profit. Sub	tract line	2 from line 1c	. 3				300		- 6
4a	Capital gain net ir	ncome (a	ttach Schedule D)	. 4a						-11
b 1	Net gain (loss) (Fo	rm 4797,	Part II, line 17) (attach Form 4797).	. 4b			_ = =		0.	
C	Capital loss dedu	ction for t	rusts	. 4c						
5	Income (loss) from	partnership	os and S corporations (attach stateme	nt) 5						A
6	Rent income (Sch	edule C)		. 6						la la
7	Unrelated debt-fir	nanced in	come (Schedule E)	. 7						
8	Interest, annuitie	s, royalt	ies, and rents from controlle	ed						
(organizations (Scl	redule F)		. 8		-4			_	
9	Investment incon	ne of a	section 501(c)(7), (9), or (1	7)						
(organization (Sch	edule G)		. 9						
		-	ncome (Schedule I)							
11 _ /	Advertising incom	e (Sched	ule J)	. 11						
			tions; attach statement)	_			0.03			
			ough 12			0				
Part			Taken Elsewhere (see in					(except f	or contrib	utions,
			be directly connected with							
			directors, and trustees (Schedule						7	
	_								- i	
										-
	•									
			ee instructions for limitation rules							
		•	4562),	,			• • • • • •	20	1	
			on Schedule A and elsewhere or					221		
			Un Schedule A and elsewhere of		_					
			compensation plans							
			Schedule I)							
			chedule J)							185
			talement)					1.0		0 (2)
		•	s 14 through 28							
			income before net operating to							
			on (limited to the amount on line							
			income before specific deduct							
			illy \$1,000, but see line 33 instr							
			e income. Subtract line 33 from							
	enter the smaller	of zero or	line 32					34	1	0

Par	L III	<u> Tax Computatior</u>									
35	Organiz	ations taxable as	corporations	(see_instruction	s for tax com	putation). Contro	olled group				
	member	s (sections 1561 and 1	1563) check here	See ins	tructions and:						
а	Enter yo	our share of the \$50,0	000, \$25,000, ar	nd \$9,925,000 t	axable income b	rackets (in that	order):				
	(1) \$		(2) \$		(3) \$	·					
b	Enter or	ganization's share of: (1)	Additional 5% tax	(not more than \$	311,750)	\$]]			
	(2) Addit	ional 3% tax (not more	than \$100,000)	•	7	\$		188			
c		tax on the amount on lir						35c			
36	Trusts	taxable at trust		instructions for	or tax compu	itation). Incomi	e tax on				
	the amo	unt on line 34 from:	¬ '		chedule D (Form 1	*		36			
37		x (see instructions)	_		•			37	-		
38		ve minimum tax						38			
39	Total, Ar	ld lines 37 and 38 to lin	ne 35c or 36, whic	hever applies							*
		Tax and Paymen						1 00 1			
		tax credit (corporations		trusts attach For	m 1116)	40a					
ь	_	edits (see instructions)						1 1			
		business credit. Attach					-				
C											
		r prior year minimum ta									
		dits. Add lines 40a thro						40e			
41		line 40e from line 39						41			
42		es. Check if from: For					•	42			
43		. Add lines 41 and 42				1 1		43			
44 a		ts: A 2011 overpaymen						1 1			
þ		timated tax payments .				1 1					
C		sited with Form 8868.						1			
d		organizations: Tax paid									
e		withholding (see instruc									
f	Credit fo	r small employer health	h insurance premiu	ms (Attach Form	3941)	441					
9		edits and payments:	For	rm 2439							
		rm 4136	L Oth	ner	Total ▶	44g		412			
45		yments. Add lines 44a						45			
45 46		yments. Add lines 44a t ed tax penalty (see instr						45 46			
	Estimate		ructions). Check if I	Form 2220 is attac	:hed,		▶∟				114
46	Estimate Tax due.	ed tax penalty (see instr	ructions). Check if I the total of lines 4:	Form 2220 is attac 3 and 46, enter an	ched,	paid	▶ 	46 47 48			11.6 Te-t
46 47 48 49	Estimate Tax due. Overpay Enter the	d tax penalty (see instr If line 45 is less than t ment. If line 45 is large amount of line 48 you want	ructions). Check if I the total of lines 4: or than the total of t: Credited to 2013	Form 2220 is attac 3 and 46, enter an lines 43 and 46, estimated tax	ched nount owed	paid	▶ Þ Þ Refunded ▶	46 47 48 49		_	111 54
46 47 48	Estimate Tax due. Overpay Enter the	ed tax penalty (see instr If line 45 is less than to ment. If line 45 is large amount of line 48 you want Statements Reg	ructions). Check if I the total of lines 4: or than the total of t: Credited to 2013 arding Certai	Form 2220 is attact 3 and 46, enter an lines 43 and 46, estimated tax	ched	paid	Refunded P	46 47 48 49 S)			111
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46 47 48 49 Par 1 2 3 Sch 1 2 3 4 a b 5 Sign Her	Estimate Tax due. Overpay Enter the t V At any ti account Bank and During ti If "Yes," Enter the edule Inventor Purchase Cost of I Addition (attach s Other co Total. Ac	and tax penalty (see instruction of line 45 is less than the search of line 45 is large amount of line 48 you want of line 4 counts. If the line tax year, did the orgon of line line tax year, did the orgon of line line tax year, did the orgon of line lines 1 through 4b organization of perjury, I declare and complete. Declaration of lines 1 through 4b organization of perjury, I declare and complete. Declaration of lines 1 through 4b organization of lines 1 through 4b organizatio	ructions). Check if the total of lines 4: for than the total of the to	Form 2220 is attact 3 and 46, enter an lines 43 and 46, estimated tax In Activities a ne organization has not y? If "Yes," the me of the foreign a distribution from zation may have to or accrued during nethod of inventional lines are to be a considered as a constant of the foreign and the foreign may be a considered for accrued during nethod of inventional lines are the foreign and the foreign may be a considered for accrued during nethod of inventional lines are the foreign may be a considered for accrued for accrued during nethod of inventional lines are the foreign may be a considered for accrued for accrue	and Other Information in the desired and other Information may country here of the tax year so file, the tax y	ormation (see or a signature or have to file Form antor of, or transfer tend of year goods sold. Some 5. Enter he have to faction?	Refunded Perinstruction other authorit TD F 90-22.1, error to, a fore subtract line ere and in the care and in the care and in the care and to the best of the care and the ca	46 47 48 49 S) y over a Report ign trust ign t	spect to spect to spect to spect to spect to specification in the specif	Yes this town to the second se	No X is true, return below No

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Р	ar	38	ŀ	ď

Description of property								
(1)								
(2)								
(3)								<u></u>
(4)								
(u)	2. Rent receiv	ed or accr	ued				-	
(a) From personal property (if the for personal property is more th more than 50%)	nan 10% but not	percer	From real and personal protection of the personal properties of rent for personal proof if the rent is based on professional profession	operty	exceeds			nected with the income (attach statement)
(1)		_			1			
2)	_							
3)								
4)								
<u> Fotal</u>		Total				(b) Total deducti	one	
c) Total income. Add totals of coner and on page 1, Part I, line 6	i, column (A)	▶				Enter here and o Part I, line 6, colu	n page 1,	•
Schedule E - Unrelated D	ebt-Financed Ir	icome (s	ee instructions)					
P. C. Link			2. Gross income from allocable to debt-finan-		3. De	ductions directly co debt-finan	onnected wi load propert	
1. Description of det	Description of debt-financed property			bed	(a) Straight line depreciation (attach statement)		(b) Other deductions (attach statement)	
(1)								
(2)								
(3)								
4)					Î			
Amount of average acquisition debt on or allocable to debt-financed property (attach statement)	or of or allocable to onced debt-financed property		6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Aliocable deductions (column 6 x total of columns 3(a) and 3(b))	
1)				%				
2)				%				
3)				%				
4)	T.			%				•
Fotals	ions included in ca	lumn 8 es, and f		lied	Part I, line Organizati	and on page 1, 7, column (A). ons (see instru	Part I,	ere and on page 1, line 7, column (B).
	2 Employee			Ī	otal of specified	Included in the controlling		6. Deductions directly connected with incom in column 5
Name of controlled organization	2. Employer identification nur		3. Net unrelated income (loss) (see instructions)		syments made	organization's gro	ss income	
organization					syments made	organization's gro	oss income	
organization	identification nur				ayments made	organization's gro	ess income	
organization (1) (2)	identification nur				ayments made	organization's gro	oss income	
organization 1) 2) 3)	identification nur				syments made	organization's gro	oss income	
organization 1) 2) 3) 4)	identification nur				syments made	organization's gro	oss income	
organization 1) 2) 3) 4)	identification nur							
organization 1) 2) 3)	identification nur	l income		pa	10. Par	organization's gro t of column 9 that is d in the controlling ation's gross income	5 1°	Deductions directly nected with income in column 10
organization 1) 2) 3) 4) Nonexempt Controlled Organ 7. Taxable Income	identification nur	l income	(loss) (see instructions) 9. Total of specific	pa	10. Par	t of column 9 that is	5 1°	inected with income in
organization 1) 2) 3) 4) Nonexempt Controlled Organ 7. Taxable Income	identification nur	l income	(loss) (see instructions) 9. Total of specific	pa	10. Par	t of column 9 that is	5 1°	inected with income in
organization 1) 2) 3) 4) Nonexempt Controlled Organ 7. Taxable Income 1)	identification nur nizations 8. Net unrelated (loss) (see instr	l income	(loss) (see instructions) 9. Total of specific	pa	10. Par	t of column 9 that is	5 1°	inected with income in
organization 1) 2) 3) 4) Nonexempt Controlled Organ 7. Taxable Income 1) 2) 3)	identification nur nizations 8. Net unrelated (loss) (see instr	l income	(loss) (see instructions) 9. Total of specific	pa	10. Par	t of column 9 that is	5 1°	inected with income in
organization 1) 2) 3) 4) Nonexempt Controlled Organ 7. Taxable Income 1)	identification nur nizations 8. Net unrelated (loss) (see instr	l income	(loss) (see instructions) 9. Total of specific	pa	10. Par include organiz	t of column 9 that is	5 1: COF	inected with income in

1. Description of income	2. Amount of	Income	Deductions directly connected (attach statement)		esides itatement)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)						
(2)						
(3)	1					
(4)						
	Enter here and Part I, line 9, co					Enter here and on page 1 Part I, line 9, column (B).
	Fait 1, 1110 5, 00	adilii (A).				Tarti, into 5, commit (b).
Totals ▶						
Schedule I - Exploited Exe	empt Activity in	come, Other Ti	nan Advertising In	icome (see instru	ctions)	
1. Description of exploited activity	2. Gross unrelated business income from trade or business	Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 25.
Totals						
Schedule J - Advertising In						
Part I Income From Per	iodicals Report	<u>ed on a Conso</u>	lidated Basis			
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	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)	1					
Part II Income From Per through 7 on a line		ed on a Separa	te Basis (For ea	ch periodical liste	ed in Part II, f	ill in columns 2
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If	5. Circulation	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but
	, arcome	2	a gain, compute	11		not more than column 4).
	= = =		cols. 5 through 7.			COMMITTEE.
(1)						
(2)	1					
(3)						
(4)						
Totals from Part I	f					
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Schedule K - Compensatio	n of Officers D	irectors and T	rustoes (see instr	ections)		
1. Name	ii oi Oiliceis, D	irectors, and r	2. Title	3. Percent of time devoted to business		ensation attributable to related business
(1)					%	
(2)					%	
(3)		1			%	
(4)		-			%	
	ort II line 4.4		<u> </u>	<u>l</u>	. 1	
Total. Enter here and on page 1, P	arı II, line 14				<u> </u>	- 000 T

Form 990-T (2012)