

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.

Return of Organization Exempt From Income Tax

2012

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning 07/01, 2012, and ending 06/30, 2013

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SOCIETY OF BIBLICAL LITERATURE		D Employer identification number 23-6390716
	Doing Business As		
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number
	825 HOUSTON MILL ROAD NE	350	(404) 727-3100
City, town or post office, state, and ZIP code ATLANTA, GA 30329		G Gross receipts \$ 4,277,876.	
F Name and address of principal officer: JOHN KUTSKO 825 HOUSTON MILL ROAD STE 350 ATLANTA, GA 30329		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: WWW.SBL-SITE.ORG		H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: 1980	M State of legal domicile: VA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE SOCIETY'S MISSION IS TO FOSTER BIBLICAL SCHOLARSHIP. OUR VISION IS TO OFFER MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT, INTELLECTUAL GROWTH, AND PROFESSIONAL DEVELOPMENT.		
	2 Check this box <input type="checkbox"/> 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)	3	14.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14.
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	28.
	6 Total number of volunteers (estimate if necessary)	6	951.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	215,413.	156,749.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,385,384.	2,455,872.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	29,890.	81,890.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	519,838.	545,298.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,150,525.	3,239,809.
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	4,550.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,171,134.	1,283,765.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 85,484.	0	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,684,163.	1,800,715.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,855,297.	3,089,030.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	295,228.	150,779.
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	5,095,049.	5,321,895.
	22 Net assets or fund balances. Subtract line 21 from line 20.	1,671,265.	1,611,739.
		3,423,784.	3,710,156.

Part II 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 Here	Signature of officer <i>John F. Kutsko</i>	Date 2/3/2014
	Type or print name and title John F. Kutsko	

Paid Preparer Use Only	Print/Type preparer's name MARC AZAR	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00746804
	Firm's name ▶ SMITH & HOWARD, P.C.	Firm's EIN ▶ 58-1250486			
	Firm's address ▶ 271 17TH STREET, SUITE 1600 ATLANTA, GA 30363	Phone no. 404-874-6244			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2012, or fiscal year beginning 07/01, 2012, and ending 06/30, 2013

2012

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

Name of exempt organization

SOCIETY OF BIBLICAL LITERATURE

Employer identification number

23-6390716

Name and title of officer

JOHN F KUTSKO, EXECUTIVE DIRECTOR

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

Table with 5 rows (1a-5a) and 2 columns (a, b) for return types and amounts. Line 1a is checked with amount 3,239,809.

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2012 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

[X] I authorize SMITH & HOWARD, P.C. to enter my PIN 61106 as my signature

on the organization's tax year 2012 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2012 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

Date 02/15/2014

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

58324330363

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2012 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date

ERO Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2012)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: 611600) (Expenses \$ 1,111,705. including grants of \$) (Revenue \$ 1,367,448.) CONGRESSES - SEE SCHEDULE O

4b (Code: 323100) (Expenses \$ 991,494. including grants of \$) (Revenue \$ 958,843.)

PUBLICATIONS - SBL IS A MEMBER OF THE ASSOCIATION OF AMERICAN UNIVERSITY PRESSES THAT HELPS SET STANDARDS REGARDING PEER REVIEWED PUBLICATIONS. SBL PUBLICATIONS IS INVOLVED IN EVERY PHASE OF PRODUCING BOOKS; ACQUISITION, DEVELOPMENT, PRODUCTION, AND MARKETING. THIS SUPPORTS PROFESSIONAL DEVELOPMENT, FACILITATES OPEN DISCUSSION, ENCOURAGES BIBLICAL RESEARCH AND STUDY, AND IS ADDRESSED TO DIVERSE AUDIENCES WITH A FOCUS ON ACADEMIA. OVER 133 MEMBERS VOLUNTEER THEIR TIME TO ASSIST IN THIS PROGRAM AREA MAKING IT POSSIBLE FOR OUR PUBLICATIONS PROGRAM TO PRODUCE OVER THIRTY FIVE MONOGRAPHS AND TWO JOURNALS EACH FISCAL YEAR.

4c (Code: 541900) (Expenses \$ 301,940. including grants of \$) (Revenue \$ 110,710.) PROFESSIONS - SEE SCHEDULE O

4d Other program services (Describe in Schedule O.) ATTACHMENT 2 (Expenses \$ 501,391. including grants of \$) (Revenue \$ 647,803.)

4e Total program service expenses 2,906,530.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b 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		X
c 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		X
d 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	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f 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	X	
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14 a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	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		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		X
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)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		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		X
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV 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 in the United States on Part IX, column (A), line 17? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III.</i>		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? <i>If "Yes," complete Schedule J.</i>	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
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? <i>If "Yes," complete Schedule L, Part I.</i>		X
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? <i>If "Yes," complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		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? <i>If "Yes," complete Schedule R, Part VI.</i>		X
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	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V. []

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a through 14b regarding Form 1096, Form W-2G, Form W-3, and various tax compliance issues.

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

Check if Schedule O contains a response to any question in this Part VI. [X]

Section A. Governing Body and Management

Table with 4 columns: Question, Line Number, Yes, No. Rows include questions about voting members, family relationships, management delegation, significant changes, asset diversion, members/stockholders, and governance decisions.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 4 columns: Question, Line Number, Yes, No. Rows include questions about local chapters, written policies, conflict of interest, whistleblower, document retention, and compensation review.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed GA,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 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.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: SUSAN MADARA 825 HOUSTON MILL ROAD SUITE 350 ATLANTA, GA 30329 404-727-3103

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

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

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

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII. X

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 156,749.			
	g Noncash contributions included in lines 1a-1f: \$				
h Total. Add lines 1a-1f		156,749.			
Program Service Revenue	2a CONGRESSES	Business Code 611600	1,367,448.		1,367,448.
	b MEMBERSHIP DUES	611600	636,016.	587,240.	48,776.
	c PUBLICATIONS	323100	329,911.	295,386.	34,525.
	d PROFESSIONS	541900	110,710.		110,710.
	e REGIONS	611600	11,787.	11,787.	
	f All other program service revenue				
	g Total. Add lines 2a-2f		2,455,872.		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 3		63,555.		63,555.
	4 Income from investment of tax-exempt bond proceeds		0		
	5 Royalties		163,667.		163,667.
	6a Gross rents	(i) Real 122,500.			
	b Less: rental expenses	100,430.			
	c Rental income or (loss)	22,070.			
	d Net rental income or (loss)		-40,668.		-40,668.
	7a Gross amount from sales of assets other than inventory	(i) Securities 913,006.	(ii) Other		
	b Less: cost or other basis and sales expenses	894,671.			
	c Gain or (loss)	18,335.			
	d Net gain or (loss)		18,335.		18,335.
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a			
	b Less: direct expenses	b			
	c Net income or (loss) from fundraising events		0		
	9a Gross income from gaming activities. See Part IV, line 19	a			
b Less: direct expenses	b				
c Net income or (loss) from gaming activities		0			
10a Gross sales of inventory, less returns and allowances	a 465,265.				
b Less: cost of goods sold	b 42,966.				
c Net income or (loss) from sales of inventory		422,299.	422,299.		
Miscellaneous Revenue		Business Code			
11a _____					
b _____					
c _____					
d All other revenue					
e Total. Add lines 11a-11d		0			
12 Total revenue. See instructions		3,239,809.	1,316,712.		1,766,348.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) CAROL MEYERS MEMBER	1.00	X						0	0	0
(16) STEVEN FRISEN MEMBER	1.00	X						0	0	0
(17) JOHN F KUTSKO EXECUTIVE DIRECTOR	60.00			X			131,084.	0	29,913.	
1b Sub-total								0	0	0
c Total from continuation sheets to Part VII, Section A								131,084.	0	29,913.
d Total (add lines 1b and 1c)								131,084.	0	29,913.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

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 response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 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.		
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)	0			
7	Other salaries and wages	879,688.	833,293.	20,693.	25,702.
8	Pension plan accruals and contributions (include section 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):				
a	Management	0			
b	Legal	21,668.	18,560.	113.	2,995.
c	Accounting	35,790.	30,367.	3,549.	1,874.
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	9,870.		9,870.	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	210,129.	200,062.	5,833.	4,234.
12	Advertising and promotion	19,380.	19,380.		
13	Office expenses	72,155.	67,648.	2,916.	1,591.
14	Information technology	95,274.	85,241.	6,075.	3,958.
15	Royalties	43,663.	43,663.		
16	Occupancy	110,000.	93,000.	11,000.	6,000.
17	Travel	131,811.	124,539.	4,425.	2,847.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	550,057.	547,320.	718.	2,019.
20	Interest	0			
21	Payments to affiliates	0			
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 above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	PRINTING	250,595.	250,595.		
b	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	Total functional expenses. Add lines 1 through 24e	3,089,030.	2,906,530.	97,016.	85,484.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	1,483,829.	2	1,403,689.
	3 Pledges and grants receivable, net	8,000.	3	6,700.
	4 Accounts receivable, net	195,659.	4	213,596.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	45,455.	8	42,963.
	9 Prepaid expenses and deferred charges	43,096.	9	22,230.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 203,236.		
	b Less: accumulated depreciation	10b 127,450.	28,646.	10c 75,786.
	11 Investments - publicly traded securities	1,307,143.	11	1,614,460.
	12 Investments - other securities. See Part IV, line 11	0	12	0
	13 Investments - program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	1,983,221.	15	1,942,471.
16 Total assets. Add lines 1 through 15 (must equal line 34)	5,095,049.	16	5,321,895.	
Liabilities	17 Accounts payable and accrued expenses	237,276.	17	246,072.
	18 Grants payable	0	18	0
	19 Deferred revenue	1,433,989.	19	1,365,667.
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 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 of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	1,671,265.	26	1,611,739.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,929,457.	27	3,141,269.
	28 Temporarily restricted net assets	199,947.	28	274,257.
	29 Permanently restricted net assets	294,380.	29	294,630.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	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.	34	5,321,895.

Part XI Reconciliation of Net Assets

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)	1	3,239,809.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,089,030.
3	Revenue less expenses. Subtract line 2 from line 1	3	150,779.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,423,784.
5	Net unrealized gains (losses) on investments	5	135,593.
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,710,156.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization SOCIETY OF BIBLICAL LITERATURE	Employer identification number 23-6390716
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III-Functionally integrated d Type III-Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X
 - (ii) A family member of a person described in (i) above?

	Yes	No
11g(ii)		X
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(iii)		X
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 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 shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 7 Amounts from line 4; 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; 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.); 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Description and percentage. Rows include: 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14%; 15 Public support percentage from 2011 Schedule A, Part II, line 14 15%; 16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; 16b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization; 17b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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.)

Section A. Public Support

Calendar 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						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities 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.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	8,765.	11,570.	16,167.	75.		36,577.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	3,103.					3,103.
c Add lines 7a and 7b.	11,868.	11,570.	16,167.	75.		39,680.
8 Public support (Subtract line 7c from line 6.)						13,626,845.

Section B. Total Support

Calendar 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.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	217,088.	234,062.	244,296.	331,171.	349,722.	1,376,339.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	217,088.	234,062.	244,296.	331,171.	349,722.	1,376,339.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1.	36,249.	34,363.				70,612.
13 Total support. (Add lines 9, 10c, 11, and 12.)	2,699,651.	2,710,376.	2,870,072.	3,405,769.	3,427,608.	15,113,476.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)).	15	90.16 %
16 Public support percentage from 2011 Schedule A, Part III, line 15.	16	89.71 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	9.11 %
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	8.86 %

- 19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

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).

ATTACHMENT 1

SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2008	2009	2010	2011	2012	TOTAL
OTHER	36,249.	34,363.				70,612.
TOTALS	<u>36,249</u>	<u>34,363</u>				<u>70,612</u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

Employer identification number

SOCIETY OF BIBLICAL LITERATURE

23-6390716

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year, and two questions about donor information.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include Purpose(s) of conservation easements, Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure, and various monitoring and reporting questions.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: \$, \$, \$, \$, \$, \$. Rows include questions about reporting works of art, historical treasures, or other similar assets for public service and financial gain.

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

Schedule D (Form 990) 2012

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 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:

Table with 2 columns: Description and Amount. Rows include: 1c Beginning balance (21,148), 1d Additions during the year (47,031), 1e Distributions during the year (65,170), 1f Ending balance (3,009). Includes 2a and 2b questions.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment
b Permanent endowment (90.1100%)
c Temporarily restricted endowment (9.8900%)
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) unrelated organizations
(ii) related organizations
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 4 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment (203,236 / 127,450 / 75,786), e Other. Total: 75,786.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) LUCE CENTER FIXED ASSETS	1,531,365.
(2) LUCE CENTER ENDOWMENT FUND	411,106.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	1,942,471.

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	3,481,106.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	135,593.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	105,704.
e	Add lines 2a through 2d	2e	241,297.
3	Subtract line 2e from line 1	3	3,239,809.
4	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	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
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

1	Total expenses and losses per audited financial statements	1	3,194,734.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	105,704.
e	Add lines 2a through 2d	2e	105,704.
3	Subtract line 2e from line 1	3	3,089,030.
4	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.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,089,030.

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

Part XIII Supplemental Information (continued)

SCHEDULE D, PART IV, QUESTION 1B

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

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

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

TOTAL	\$105,704

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

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

▶ Attach to Form 990. ▶ See separate instructions.

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

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space 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
(1) EUROPE			PROGRAM SERVICES	CONFERENCES	18,735.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					18,735.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					18,735.

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

Schedule F (Form 990) 2012

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

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.

(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)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2012

JSA

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Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) Yes 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 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 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 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 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 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)**

Department of the Treasury
Internal Revenue Service

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

2012

Open to Public Inspection

Name of the organization
SOCIETY OF BIBLICAL LITERATURE

Employer identification number
23-6390716

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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:

- a** The organization?
- b** Any related organization?
- 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?
- b** Any related organization?
- 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

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

Page 2

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

For each individual whose compensation must be reported 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.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JOHN F KUTSKO EXECUTIVE DIRECTOR	(i) 129,084. (ii) 0 (iii) 0	(ii) 2,000. (iii) 0	(iii) 0	13,326.	17,673.	162,083.	
2	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
3	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
4	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
5	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
6	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
7	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
8	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
9	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
10	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
11	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
12	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
13	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
14	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
15	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	
16	(i) ----- (ii) ----- (iii) -----	(ii) ----- (iii) -----	(iii) -----	-----	-----	-----	

Schedule J (Form 990) 2012

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 O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

**Open to Public
Inspection**

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

Name of the organization

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23-6390716

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

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

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

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

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

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

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

Employer identification number

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

ATTACHMENT 2FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
MEMBERSHIP		210,294.	636,016.
RESEARCH AND TECHNOLOGY		162,276.	
REGIONS		128,821.	11,787.
TOTALS		<u>501,391.</u>	<u>647,803.</u>

Name of the organization SOCIETY OF BIBLICAL LITERATURE	Employer identification number 23-6390716
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ATTACHMENT 3FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	(A) <u>TOTAL</u> <u>REVENUE</u>	(B) <u>RELATED OR</u> <u>EXEMPT REVENUE</u>	(C) <u>UNRELATED</u> <u>BUSINESS REV.</u>	(D) <u>EXCLUDED</u> <u>REVENUE</u>
INTEREST INCOME	1,658.			1,658.
DIVIDEND INCOME	61,897.			61,897.
TOTALS	<u>63,555.</u>			<u>63,555.</u>

ATTACHMENT 4FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD

GROSS SALES LESS RETURNS AND ALLOWANCES	465,265.
INVENTORY AT BEGINNING OF YEAR	45,455.
PURCHASES	
SALARIES AND WAGES	
OTHER COSTS	40,474.
SUBTOTAL	<u>85,929.</u>
MINUS ENDING INVENTORY	42,963.
COST OF GOODS SOLD	<u>42,966.</u>

ATTACHMENT 5FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

<u>DESCRIPTION</u>	<u>ENDING</u> <u>BOOK VALUE</u>
PREPAID EXPENSES	22,230.
TOTALS	<u>22,230.</u>

ATTACHMENT 6

Name of the organization

Employer identification number

SOCIETY OF BIBLICAL LITERATURE

23-6390716

ATTACHMENT 6 (CONT'D)FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
CORPORATE STOCKS	403,778.	FMV
MUTUAL FUNDS & ETF'S	1,210,682.	FMV
EQUITY SECURITIES		FMV
TOTALS	<u>1,614,460.</u>	

ATTACHMENT 7FORM 990, PART X - DEFERRED REVENUE

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
DEFERRED REVENUE	1,365,667.
TOTALS	<u>1,365,667.</u>

RENT AND ROYALTY INCOME

Taxpayer's Name SOCIETY OF BIBLICAL LITERATURE	Identifying Number 23-6390716
--	---

DESCRIPTION OF PROPERTY
RENTAL BUILDING

	Yes	No	Did you actively participate in the operation of the activity during the tax year?
--	-----	----	--

TYPE OF PROPERTY:		
REAL RENTAL INCOME		
OTHER INCOME:		
RENTAL BUILDING	122,500.	
TOTAL GROSS INCOME		122,500.
OTHER EXPENSES:		
SEE ATTACHMENT		
DEPRECIATION (SHOWN BELOW)	62,738.	
LESS: Beneficiary's Portion		
AMORTIZATION		
LESS: Beneficiary's Portion		
DEPLETION		
LESS: Beneficiary's Portion		
TOTAL EXPENSES		163,168.
TOTAL RENT OR ROYALTY INCOME (LOSS)		-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) _____

SCHEDULE FOR DEPRECIATION CLAIMED

(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des.	(e) Bus. %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(i) Life or rate	(j) Depreciation for this year
SEE ATTACHMENT									
Totals									

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

OTHER INCOME

RENTAL BUILDING	<u>122,500.</u>
	<u>122,500.</u>

OTHER DEDUCTIONS

INSURANCE	3,284.
LEGAL AND OTHER PROFESSIONAL FEES	384.
REPAIRS	51,559.
UTILITIES	37,773.
WAGES	7,430.
	<u>100,430.</u>

RENT AND ROYALTY SUMMARY

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

**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 SOCIETY OF BIBLICAL LITERATURE	Employer identification number 23-6390716
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Note: Form 5227 filers need to complete only Parts I and II.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 shares 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) for the entire year Subtract (e) from (d)
1a					

b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b	1b	
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	2	
3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts	3	
4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2011 Capital Loss Carryover Worksheet	4	()
5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back	5	

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 shares 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) for the entire year Subtract (e) from (d)
6a					

b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b	6b	18,335.
7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824	7	
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts	8	
9 Capital gain distributions	9	
10 Gain from Form 4797, Part I	10	
11 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2011 Capital Loss Carryover Worksheet	11	()
12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, column (3) on the back	12	18,335.

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

Schedule D (Form 1041) 2012

Part III Summary of Parts I and II		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
Caution: Read the instructions before completing this part.				
13	Net short-term gain or (loss)	13		
14	Net long-term gain or (loss):			
a	Total for year	14a		18,335.
b	Unrecaptured section 1250 gain (see line 18 of the wrksh.)	14b		
c	28% rate gain	14c		
15	Total net gain or (loss). Combine lines 13 and 14a	15		18,335.

Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

Part IV Capital Loss Limitation

16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000	16	()
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Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

- Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions 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.

Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		
18	Enter the smaller of line 14a or 15 in column (2) but not less than zero	18		
19	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in Income in Part I of Form 990-T)	19		
20	Add lines 18 and 19	20		
21	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	21		
22	Subtract line 21 from line 20. If zero or less, enter -0-	22		
23	Subtract line 22 from line 17. If zero or less, enter -0-	23		
24	Enter the smaller of the amount on line 17 or \$2,400	24		
25	Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. <input type="checkbox"/> No. Enter the amount from line 23	25		
26	Subtract line 25 from line 24	26		
27	Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 27 thru 30; go to line 31. <input type="checkbox"/> No. Enter the smaller of line 17 or line 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
29	Subtract line 28 from line 27	29		
30	Multiply line 29 by 15% (.15)			30
31	Figure the tax on the amount on line 23. Use the 2012 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)			31
32	Add lines 30 and 31			32
33	Figure the tax on the amount on line 17. Use the 2012 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)			33
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36)			34

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 and Losses - Assets Held More Than One Year

(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.
6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b					18,335.

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

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**

Name(s) shown on return: **SOCIETY OF BIBLICAL LITERATURE**
Identifying number: **23-6390716**

1 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). **1**

Part I 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)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	ATTACHMENT 1						

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.

8 Nonrecaptured net section 1231 losses from prior years (see instructions) **8** **20,351.**

9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions) **9**

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):

11 Loss, if any, from line 7 **11** ()

12 Gain, if any, from line 7 or amount from line 8, if applicable **12**

13 Gain, if any, from line 31 **13**

14 Net gain or (loss) from Form 4684, lines 31 and 38a **14**

15 Ordinary gain from installment sales from Form 6252, line 25 or 36 **15**

16 Ordinary gain or (loss) from like-kind exchanges from Form 8824 **16**

17 Combine lines 10 through 16 **17**

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." See instructions **18a**

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 **18b**

For Paperwork Reduction Act Notice, see separate instructions.

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)

Table with 3 columns: (a) Description of section 1245, 1250, 1252, 1254, or 1255 property; (b) Date acquired (mo., day, yr.); (c) Date sold (mo., day, yr.). Rows A, B, C, D.

Main calculation table with columns: Property A, Property B, Property C, Property D. Rows 20-29b including Gross sales price, Cost or other basis, Depreciation, Adjusted basis, Total gain, and various depreciation adjustments.

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

Summary rows 30-32: 30 Total gains for all properties; 31 Add property columns A through D; 32 Subtract line 31 from line 30.

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions)

Table with 3 columns: (a) Section 179; (b) Section 280F(b)(2). Rows 33-35: 33 Section 179 expense deduction; 34 Recomputed depreciation; 35 Recapture amount.

SOCIETY OF BIBLICAL LITERATURE
 Supplement to Form 4797 Part I Detail

23-6390716
 ATTACHMENT 1

Description	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed or Allowable	Cost or Other Basis	Gain or (Loss) for entire year
COMPUTERS	VAR	VAR		9,750.	9,750.	
Totals						

Form **990-T**

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0047

2012

Department of the Treasury
Internal Revenue Service

For calendar year 2012 or other tax year beginning 07/01, 2012, and ending 06/30, 2013. See separate instructions.

Open to Public Inspection for 501(c)(3) Organizations Only

A Check box if address changed

B Exempt under section

501(C)(3) 220(e) 530(a) 529(a)

C Book value of all assets at end of year

Name of organization (Check box if name changed and see instructions.)

SOCIETY OF BIBLICAL LITERATURE

Number, street, and room or suite no. If a P.O. box, see instructions.

825 HOUSTON MILL ROAD NE 350

City or town, state, and ZIP code

ATLANTA, GA 30329

D Employer identification number (Employees' trust, see instructions.)

23-6390716

E Unrelated business activity codes (see instructions.)

F Group exemption number (see instructions) **G** Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **SUSAN MADARA** Telephone number **404-727-3103**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
	c Balance	1c		
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4a	Capital gain net income (attach Schedule D)	4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5		
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (see instructions; attach statement)	12		
13	Total. Combine lines 3 through 12	13	0	

Part II Deductions Not Taken Elsewhere (see instructions for limitations on deductions) (except for contributions, deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach statement)	18	
19	Taxes and licenses	19	
20	Charitable contributions (see instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach statement)	28	
29	Total deductions. Add lines 14 through 28	29	
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	
31	Net operating loss deduction (limited to the amount on line 30)	31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	
33	Specific deduction (generally \$1,000, but see line 33 instructions for exceptions)	33	
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	0

Part III Tax Computation

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) \$
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

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a
b Other credits (see instructions) 40b
c General business credit. Attach Form 3800 (see instructions) 40c
d Credit for prior year minimum tax (attach Form 8801 or 8827) 40d
e 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 8811 Form 8867 Form 8868 Other (attach statement) 42
43 Total tax. Add lines 41 and 42 43 0
44 a Payments: A 2011 overpayment credited to 2012 44a
b 2012 estimated tax payments 44b
c Tax deposited with Form 8868. 44c
d Foreign organizations: Tax paid or withheld at source (see instructions) 44d
e Backup withholding (see instructions) 44e
f Credit for small employer health insurance premiums (Attach Form 8941) 44f
g 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 47
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid 48
49 Enter the amount of line 48 you want: Credited to 2013 estimated tax Refunded 49

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here Yes No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. Yes No
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

1 Inventory at beginning of year 1
2 Purchases 2
3 Cost of labor 3
4 a Additional section 263A costs (attach statement) 4a
b Other costs (attach statement) 4b
5 Total. Add lines 1 through 4b 5
6 Inventory at end of year 6
7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2. 7
8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer Date Title
Signature: [Handwritten Signature] Date: 1/23/2014 Title: Executive Director
May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
MARC AZAR
Firm's name SMITH & HOWARD, P.C. Firm's EIN 58-1250486
Firm's address 271 17TH STREET, SUITE 1600 Phone no. 404-874-6244
ATLANTA, GA 30363 Form 990-T (2012)

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

Table with 4 rows for property description (1-4).

2. Rent received or accrued

Table with 3 columns: (a) From personal property, (b) From real and personal property, and 3(a) Deductions directly connected with the income.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A).

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B).

Schedule E - Unrelated Debt-Financed Income (see instructions)

Table with 5 columns: 1. Description of debt-financed property, 2. Gross Income from or allocable to debt-financed property, 3. Deductions directly connected with or allocable to debt-financed property, 4. Amount of average acquisition debt, 5. Average adjusted basis, 6. Column 4 divided by column 5, 7. Gross income reportable, 8. Allocable deductions.

Totals

Total dividends received deductions included in column 8

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

Table for Exempt Controlled Organizations with 6 columns: 1. Name of controlled organization, 2. Employer identification number, 3. Net unrelated income, 4. Total of specified payments made, 5. Part of column 4 that is included in the controlling organization's gross income, 6. Deductions directly connected with income in column 5.

Nonexempt Controlled Organizations

Table for Nonexempt Controlled Organizations with 5 columns: 7. Taxable income, 8. Net unrelated income, 9. Total of specified payments made, 10. Part of column 9 that is included in the controlling organization's gross income, 11. Deductions directly connected with income in column 10.

Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Totals

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

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)						
(2)						
(3)						
(4)						
Totals ▶		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 26.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated 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)						
Totals (carry to Part II, line (5)) . . . ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line 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)						
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.
Totals, Part II (lines 1-5) . . . ▶						

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14. ▶			

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

[Handwritten signature]



Amended Amended due to IRS changes Address Change UET Annualization Exception attached

Exempt Organization Unrelated Business Income Tax Return (Under Georgia Code Section 48-7-25)				20 12	
For the taxable year beginning <u>07/01</u> , 20 <u>12</u> and ending <u>06/30</u> , 20 <u>13</u>					
Name of Organization		Name of Fiduciary		Federal Employer ID No. (in case of employees' trust described in section 401 (a) and exempt under section 501 (a). Insert the trust's identification number.)	
Society of Biblical Literature					
Number and Street		Number and Street			
825 Houston Mill Road NE				23-6390716	
City or Town		City or Town		NAICS Code	Date of current exemption letter.
Atlanta					IRS code section for which you are exempt. Sec. 501 (C)(3)
State	Zip Code	State	Zip Code		
GA	30329				

SCHEDULE 1

1. Unrelated business taxable income from Federal Form 990-T (attach copy) ▶	1.
2. Additions ▶	2.
3. Total (add line 1 and line 2) ▶	3.
4. Subtractions ▶	4.
5. Georgia unrelated business taxable income (line 3 less line 4). ▶	5.

SCHEDULE 2

COMPUTATION OF GEORGIA UNRELATED BUSINESS INCOME TAX	
1. Line 5, above, multiplied by 6% ▶	1.
2. Less: Credits and Payments ▶	2.
3. Withholding Credits (G-2A, G-2LP and/or G-2RP). ▶	3.
4. Balance of tax due OR overpayment ▶	4.
5. Interest due (see instructions). ▶	5.
6. Underestimated tax penalty ▶	6.
7. Other penalties due (see instructions) ▶	7.
8. Balance of tax, interest and penalties due with return ▶	8.
9. If line 4 is an overpayment, amount to be credited on 20 <u>13</u> 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 information of which s/he has any knowledge.

John F. Smith

SMITH & HOWARD, P.C.

Signature of Officer

Signature of Individual or Firm Preparing Return

Executive Director 2/3/2014
 Title Date

P00746804
 Employee ID or Social Security Number

Form **990-T**

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0687

2012

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

For calendar year 2012 or other tax year beginning 07/01, 2012, and ending 06/30, 2013. See separate instructions.

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

D Employer identification number (Employers' trust, see instructions.)

B Exempt under section

Print or Type

SOCIETY OF BIBLICAL LITERATURE

23-6390716

501(C) (3) 220(e) 408A 530(a) 529(a)

Number, street, and room or suite no. If a P.O. box, see instructions.

825 HOUSTON MILL ROAD NE 350

E Unrelated business activity codes (see instructions.)

City or town, state, and ZIP code

ATLANTA, GA 30329

C Book value of all assets at end of year

5,321,895.

F Group exemption number (see instructions) ▶

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. ▶

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ SUSAN MADARA Telephone number ▶ 404-727-3103

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
	c Balance ▶ 1c			
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4a	Capital gain net income (attach Schedule D)	4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) . .	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5		
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (see instructions; attach statement).	12		
13	Total. Combine lines 3 through 12	13	0	

Part II Deductions Not Taken Elsewhere (see instructions for limitations on deductions) (except for contributions, deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach statement)	18	
19	Taxes and licenses	19	
20	Charitable contributions (see instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach statement)	28	
29	Total deductions. Add lines 14 through 28	29	
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	
31	Net operating loss deduction (limited to the amount on line 30)	31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	
33	Specific deduction (generally \$1,000, but see line 33 instructions for exceptions)	33	
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	0

Part III Tax Computation

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) \$
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

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a
b Other credits (see instructions) 40b
c General business credit. Attach Form 3800 (see instructions) 40c
d Credit for prior year minimum tax (attach Form 8801 or 8827) 40d
e 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 8868 Other (attach statement) 42
43 Total tax. Add lines 41 and 42 43 0
44 a Payments: A 2011 overpayment credited to 2012 44a
b 2012 estimated tax payments 44b
c Tax deposited with Form 8868. 44c
d Foreign organizations: Tax paid or withheld at source (see instructions) 44d
e Backup withholding (see instructions) 44e
f Credit for small employer health insurance premiums (Attach Form 8941) 44f
g 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 47
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid 48
49 Enter the amount of line 48 you want: Credited to 2013 estimated tax Refunded 49

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2012 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here Yes No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file. Yes No
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

1 Inventory at beginning of year 1
2 Purchases 2
3 Cost of labor 3
4a Additional section 263A costs (attach statement) 4a
b Other costs (attach statement) 4b
5 Total. Add lines 1 through 4b 5
6 Inventory at end of year 6
7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2, 7
8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No

Sign Here 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 taxpayer) is based on all information of which preparer has any knowledge.
Signature of officer Date Title
MARC AZAR 2/3/14 Executive Director
May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
MARC AZAR
Firm's name SMITH & HOWARD, P.C. Firm's EIN 58-1250486
Firm's address 271 17TH STREET, SUITE 1600 ATLANTA, GA 30363 Phone no. 404-874-6244

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach statement)
(1)		
(2)		
(3)		
(4)		
Total	Total	

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ▶

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach statement)	(b) Other deductions (attach statement)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach statement)	5. Average adjusted basis of or allocable to debt-financed property (attach statement)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals ▶			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).

Total dividends-received deductions included in column 8 ▶

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).

Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Totals ▶

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Enter here and on page 1, Part I, line 9, column (A).				Enter here and on page 1, Part I, line 9, column (B).
Totals ▶				

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

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)						
(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 26.
Totals ▶						

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated 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)						
Totals (carry to Part II, line (5)) . . . ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line 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)						
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.
Totals, Part II (lines 1-5) . . . ▶						

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14. ▶			