

# Return of Organization Exempt From Income Tax

**2008**

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 2008 calendar year, or tax year beginning** 07/01, 2008, and ending 06/30, 2009

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>Please use IRS label or print or type. See Specific Instructions.</b>	<b>C Name of organization</b> SOCIETY OF BIBLICAL LITERATURE Doing Business As _____ Number and street (or P.O. box if mail is not delivered to street address) Room/suite 825 HOUSTON MILL ROAD 350 City or town, state or country, and ZIP + 4 ATLANTA, GA 30329		<b>D Employer identification number</b> 23-6390716
		<b>F Name and address of principal officer:</b> KENT RICHARDS 825 HOUSTON MILL ROAD STE 350 ATLANTA, GA 30329		<b>E Telephone number</b> (404) 727-2320
		<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G Gross receipts \$</b> 2,699,967. <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
		<b>J Website:</b> ▶ WWW.SBL-SITE.ORG		<b>H(c)</b> Group exemption number ▶ _____
<b>K Type of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ _____			<b>L Year of formation:</b> 1980 <b>M State of legal domicile:</b> GA	

**Part I Summary**

<b>Activities &amp; Governance</b>	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 assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	14	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	14	
	5	Total number of employees (Part V, line 2a)	<b>5</b>	30	
	6	Total number of volunteers (estimate if necessary)	<b>6</b>	NONE	
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	<b>7a</b>		
	b Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	NONE		
<b>Revenue</b>			<b>Prior Year</b>	<b>Current Year</b>	
	8	Contribution and grants (Part VIII, line 1h)	108,963.	97,711.	
	9	Program service revenue (Part VIII, line 2g)	1,990,211.	1,951,767.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,950.	20,212.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	385,326.	408,414.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,640,450.	2,478,104.	
	<b>Expenses</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	83,984.	7,543.
		14	Benefits paid to or for members (Part IX, column (A), line 4)		NONE
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,000,637.	1,120,056.
		16a	Professional fundraising fees (Part IX, column (A), line 11e)		NONE
			b Total fundraising expenses, Part IX, column (D), line 25 ▶ 116,740.		
		17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,666,075.	1,559,632.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,750,696.	2,687,231.	
19		Revenue less expenses. Subtract line 18 from line 12	-110,246.	-209,127.	
<b>Net Assets or Fund Balances</b>			<b>Beginning of Year</b>	<b>End of Year</b>	
	20	Total assets (Part X, line 16)	4,253,192.	3,749,590.	
	21	Total liabilities (Part X, line 26)	1,283,455.	1,341,050.	
22	Net assets or fund balances. Subtract line 21 from line 20.	2,969,737.	2,408,540.		

**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.

<b>Sign Here</b>	Signature of officer _____ Date _____		
	Type or print name and title _____		

<b>Paid Preparer's Use Only</b>	Preparer's signature ▶ _____ Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ SMITH & HOWARD, P.C. 171 17TH STREET, SUITE 900 ATLANTA, GA 30363	Date _____ Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) P00746804 EIN ▶ 58-1250486 Phone no. ▶ 404-874-6244
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May the IRS discuss this return with the preparer shown above? (See instructions)  Yes  No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2008)

**Part III Statement of Program Service Accomplishments** (see instructions)

**1** Briefly describe the organization's mission:

SEE STATEMENT 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  No

If "Yes" describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . .

Yes  No

If "Yes," describe these changes on Schedule O.

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: \_\_\_\_\_) (Expenses \$ 1,001,092. including grants of \$ 4,475.) (Revenue \$ 1,048,086.)

CONGRESSES - SEE SCHEDULE O FOR DESCRIPTION

**4b** (Code: \_\_\_\_\_) (Expenses \$ 889,910. including grants of \$ \_\_\_\_\_) (Revenue \$ 917,660.)

PUBLICATIONS - SEE SCHEDULE O FOR DESCRIPTION

**4c** (Code: \_\_\_\_\_) (Expenses \$ 261,518. including grants of \$ 3,068.) (Revenue \$ 34,213.)

PROFESSIONS - SEE SCHEDULE O FOR DESCRIPTION

**4d** Other program services. (Describe in Schedule O.) SEE STATEMENT 2

(Expenses \$ 340,673. including grants of \$ \_\_\_\_\_) (Revenue \$ 462,846.)

**4e Total program service expenses** ▶ \$ 2,493,193. (Must equal Part IX, Line 25, column (B).)

**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)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<input checked="" type="checkbox"/>
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		<input checked="" type="checkbox"/>
5	<b>Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		<input checked="" type="checkbox"/>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		<input checked="" type="checkbox"/>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<input checked="" type="checkbox"/>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<input checked="" type="checkbox"/>	
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	<input checked="" type="checkbox"/>	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	<input checked="" type="checkbox"/>	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		<input checked="" type="checkbox"/>
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?		<input checked="" type="checkbox"/>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule F, Part II</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Part III</i>	<input checked="" type="checkbox"/>	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		<input checked="" type="checkbox"/>
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		<input checked="" type="checkbox"/>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<input checked="" type="checkbox"/>
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		<input checked="" type="checkbox"/>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		<input checked="" type="checkbox"/>
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		<input checked="" type="checkbox"/>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	<input checked="" type="checkbox"/>	
24a	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 questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		<input checked="" type="checkbox"/>
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?		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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>		<input checked="" type="checkbox"/>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		<input checked="" type="checkbox"/>

**Part IV Checklist of Required Schedules** *(continued)*

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		X
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		X
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		X
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .		X
<b>30</b>	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
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .		X
<b>32</b>	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
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .		X
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .		X
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		X
<b>36</b>	<b>Section 501(c)(3) organizations.</b> 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
<b>37</b>	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

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question ID, question text, and Yes/No columns. Includes questions 1a through 12b regarding IRS filings and tax compliance.

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include questions about voting members, family relationships, management delegation, organizational changes, asset diversions, members/stockholders, governing body decisions, meeting documentation, local chapters, Form 990 review, and officer reachability.

Section B. Policies

Table with 3 columns: Question, Yes, No. Rows include questions about conflict of interest policy, whistleblower policy, document retention, compensation review, joint ventures, and policy adoption for joint ventures.

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include questions about state filing requirements, public inspection of Forms 1023/1024/990-T, website availability, and disclosure of governing documents and officer information.

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
LOVEDAY C. A. ALEXANDER MEMBER	NONE	X								
CHERYL B. ANDERSON MEMBER	NONE	X								
BRUCE C. BIRCH MEMBER & CHAIR	NONE	X								
DAVID J. A. CLINES MEMBER & PRESIDENT	NONE	X								
KRISTIN DE TROYER MEMBER	NONE	X								
JOEL B. GREEN MEMBER	NONE	X								
JEFFREY K. KUAN MEMBER	NONE	X								
KATHLEEN M. O'CONNOR MEMBER	NONE	X								
FERNANDO F. SEGOVIA MEMBER	NONE	X								
L. MICHAEL WHITE MEMBER	NONE	X								
FRANCISCO LOZADA MEMBER	NONE	X								
ADELE REINHARTS MEMBER	NONE	X								
JOHN STRONG MEMBER	NONE	X								
KENT HAROLD RICHARDS TREASURER & EXECUTIVE DIRECTOR	55.			X			85,470.		64,827.	
VINCENT WIMBUSH VICE PRESIDENT	NONE			X						

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (check all that apply), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation.

1b Total 85,470. 64,827.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization NONE

Table with 3 columns: Question, Yes, No. Rows 3, 4, 5 regarding compensation reporting and unrelated organizations.

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.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization NONE



**Part VIII Statement of Revenue**

23-6390716

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>					
	<b>b</b> Membership dues . . . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1c</b>					
	<b>d</b> Related organizations . . . . .	<b>1d</b>					
	<b>e</b> Government grants (contributions) . .	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .	<b>1f</b>	97,711.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$						
	<b>h Total.</b> Add lines 1a-1f . . . . . ▶			97,711.			
<b>Program Service Revenue</b>	<b>Business Code</b>						
	<b>2a</b> JOINT ANNUAL MEETING / TRADE SHOW			980,035.			980,035.
	<b>b</b> MARKETING REVENUE - TRADE SHOWS			106,177.			106,177.
	<b>c</b> SUBSCRIPTION REVENUE			375,304.	375,304.		
	<b>d</b> MEMBERSHIP DUES			464,720.	464,720.		
	<b>e</b> MARKETING REVENUE - JOURNAL ADVERTISING			25,531.			25,531.
	<b>f</b> All other program service revenue . . . . .						
	<b>g Total.</b> Add lines 2a-2f . . . . . ▶			1,951,767.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . . <b>STMT 3</b> ▶			32,909.			32,909.
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . ▶			316.			316.
	<b>5</b> Royalties . . . . . ▶			77,979.			77,979.
		(i) Real	(ii) Personal				
	<b>6a</b> Gross Rents . . . . .	106,200.					
	<b>b</b> Less: rental expenses . . . . .	163,879.					
	<b>c</b> Rental income or (loss) . . . . .	-57,679.					
	<b>d</b> Net rental income or (loss) . . . . . ▶			-57,679.			-57,679.
		(i) Securities	(ii) Other				
	<b>7a</b> Gross amount from sales of assets other than inventory		NONE				
	<b>b</b> Less: cost or other basis and sales expenses . . . . .		13,013.				
	<b>c</b> Gain or (loss) . . . . .		-13,013.				
	<b>d</b> Net gain or (loss) . . . . . ▶			-13,013.			-13,013.
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18. . . . . <b>a</b>						
	<b>b</b> Less: direct expenses . . . . . <b>b</b>						
	<b>c</b> Net income or (loss) from fundraising events . . . . . ▶			NONE			
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19. . . . . <b>a</b>						
	<b>b</b> Less: direct expenses . . . . . <b>b</b>						
<b>c</b> Net income or (loss) from gaming activities . . . . . ▶			NONE				
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . . <b>a</b>		396,836.					
<b>b</b> Less: cost of goods sold . . . . . <b>b</b>		44,971.					
<b>c</b> Net income or (loss) from sales of inventory. . <b>STMT 5</b> ▶			351,865.	351,865.			
<b>Miscellaneous Revenue</b>							
<b>Business Code</b>							
<b>11a</b> JOB OPENINGS PUBLICATION			33,868.			33,868.	
<b>b</b> MISC. REVENUE			2,381.	2,381.			
<b>c</b> _____							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . . ▶			36,249.				
<b>12 Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . ▶			2,478,104.	1,194,270.		1,186,123.	

**Part IX Statement of Functional Expenses**

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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 U.S. See Part IV, line 21 . . .	NONE			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	NONE			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	7,543.	7,543.		
4 Benefits paid to or for members . . . . .	NONE			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	162,801.	122,328.	20,618.	19,855.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	NONE			
7 Other salaries and wages . . . . .	756,035.	696,064.	16,512.	43,459.
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions) . .	67,290.	61,616.	1,826.	3,848.
9 Other employee benefits . . . . .	76,183.	61,708.	6,095.	8,380.
10 Payroll taxes . . . . .	57,747.	51,236.	2,415.	4,096.
11 Fees for services (non-employees):				
a Management . . . . .	NONE			
b Legal . . . . .	9,528.	7,622.	953.	953.
c Accounting . . . . .	28,884.	23,431.	2,727.	2,726.
d Lobbying . . . . .	NONE			
e Professional fundraising services. See Part IV, line 17	NONE			
f Investment management fees . . . . .	50.		50.	
g Other . . . . .	148,346.	143,531.	1,578.	3,237.
12 Advertising and promotion . . . . .	18,054.	15,306.	244.	2,504.
13 Office expenses . . . . .	93,445.	85,238.	4,474.	3,733.
14 Information technology . . . . .	106,169.	97,630.	3,522.	5,017.
15 Royalties . . . . .	36,713.	36,713.		
16 Occupancy . . . . .	24,480.	19,584.	2,448.	2,448.
17 Travel . . . . .	172,458.	156,252.	7,235.	8,971.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings . . . .	478,960.	476,245.	963.	1,752.
20 Interest . . . . .	NONE			
21 Payments to affiliates . . . . .	NONE			
22 Depreciation, depletion, and amortization . . . .	15,280.	12,224.	1,528.	1,528.
23 Insurance . . . . .	16,543.	14,920.	702.	921.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a PRINTING -----	193,354.	193,346.	4.	4.
b DISTRIBUTION COSTS -----	81,455.	81,455.		
c OTHER EXPENSES -----	64,798.	63,809.	863.	126.
d DUES AND DISCOUNTS -----	37,143.	35,028.	907.	1,208.
e COMMUNICATION -----	33,972.	30,364.	1,634.	1,974.
f All other expenses -----				
25 <b>Total functional expenses.</b> Add lines 1 through 24f	2,687,231.	2,493,193.	77,298.	116,740.
26 <b>Joint Costs.</b> Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing . . . . .		<b>1</b>	
	<b>2</b> Savings and temporary cash investments . . . . .	1,052,820.	<b>2</b>	906,455.
	<b>3</b> Pledges and grants receivable, net . . . . .	8,175.	<b>3</b>	400.
	<b>4</b> Accounts receivable, net . . . . .	58,716.	<b>4</b>	64,722.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sales or use . . . . .	48,955.	<b>8</b>	40,265.
	<b>9</b> Prepaid expenses and deferred charges . . . . . SFMT. 6 . . . . .	41,752.	<b>9</b>	27,691.
	<b>10a</b> Land, buildings, and equipment: cost basis . . . . . <b>10a</b> 125,147.			
	<b>b</b> Less: accumulated depreciation. Complete Part VI of Schedule D. . . . . <b>10b</b> 82,870.	14,099.	<b>10c</b>	42,277.
	<b>11</b> Investments - publicly traded securities . . . . . SFMT. 7 . . . . .	949,724.	<b>11</b>	680,924.
	<b>12</b> Investments - other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	2,078,951.	<b>15</b>	1,986,856.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	4,253,192.	<b>16</b>	3,749,590.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	200,728.	<b>17</b>	205,597.
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . . SFMT. 8 . . . . .	1,082,727.	<b>19</b>	1,135,453.
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25. . . . .	1,283,455.	<b>26</b>	1,341,050.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	2,521,868.	<b>27</b>	2,001,937.
	<b>28</b> Temporarily restricted net assets . . . . .	197,869.	<b>28</b>	123,453.
	<b>29</b> Permanently restricted net assets . . . . .	250,000.	<b>29</b>	283,150.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
	<b>33</b> Total net assets or fund balances . . . . .	2,969,737.	<b>33</b>	2,408,540.
	<b>34</b> Total liabilities and net assets/fund balances . . . . .	4,253,192.	<b>34</b>	3,749,590.

**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .		X
<b>b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	X	
<b>c</b>	If "Yes" to lines 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? . . . . .	X	
<b>3a</b>	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>b</b>	If "Yes," did the organization undergo the required audit or audits? . . . . .		

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2008**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

<b>Name of the organization</b> SOCIETY OF BIBLICAL LITERATURE	<b>Employer identification number</b> 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: (Please check only **one** organization.)

- 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)**. (Attach Schedule H.)
- 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)**. (see instructions)
- 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 - Other
- 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?
  - (ii) A family member of a person described in (i) above?
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11g(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11g(iii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**h** Provide the following information about the organizations the organization supports.

(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 support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2004, (b) 2005, (c) 2006, (d) 2007, (e) 2008, (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 1-3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2004, (b) 2005, (c) 2006, (d) 2007, (e) 2008, (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; 10 Other income. Do not include gain or loss from the sale of capital assets; 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 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f
16a 33 1/3% support test - 2008. 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.
16b 33 1/3% support test - 2007. 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.
17a 10%-facts-and-circumstances test - 2008. 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 "fact-and-circumstances" test, check this box and stop here.
17b 10%-facts-and-circumstances test - 2007. 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.
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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	182,947.	100,998.	48,221.	108,963.	97,711.	538,840.
<b>2</b> 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 . . . . .	2,032,914.	2,016,376.	2,393,725.	2,374,965.	2,348,603.	11,166,583.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1-5 . . . . .	2,215,861.	2,117,374.	2,441,946.	2,483,928.	2,446,314.	11,705,423.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .	7,726.	14,060.	11,410.	9,015.	8,765.	50,976.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 . . . . .						
<b>c</b> Add lines 7a and 7b. . . . .	7,726.	14,060.	11,410.	9,015.	8,765.	50,976.
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						11,654,447.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6. . . . .	2,215,861.	2,117,374.	2,441,946.	2,483,928.	2,446,314.	11,705,423.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	167,926.	183,168.	268,448.	259,113.	217,088.	1,095,743.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .	167,926.	183,168.	268,448.	259,113.	217,088.	1,095,743.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .	75,376.	58,491.	77,649.	88,528.	36,249.	336,293.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						13,137,459.

**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** . . . . .

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)). . . . .	<b>15</b>	88.71%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g . . . . .	<b>16</b>	89.24%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	8.34%
<b>18</b> Investment income percentage from 2007 Schedule A, Part IV-A, line 27h . . . . .	<b>18</b>	7.74%

**19a 33 1/3% support tests - 2008.** 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 - 2007.** 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 explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2004	2005	2006	2007	2008	TOTAL
OTHER	75,376.	58,491.	77,649.	88,528.	36,249.	336,293.
TOTALS	75,376.	58,491.	77,649.	88,528.	36,249.	336,293.

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

**2008**

Name of the organization

SOCIETY OF BIBLICAL LITERATURE

Employer identification number

23-6390716

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

**General Rule**

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) . . . . . ▶ \$ \_\_\_\_\_

**Caution.** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)



SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

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: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees...

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). 2 Complete lines 2a-2d if the organization held a qualified conservation contribution... 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 8/17/06. 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year. 4 Number of states where property subject to conservation easement is located. 5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No. 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year. 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year. 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No. 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1. b Assets included in Form 990, Part X.

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

- 3 Using the organization's 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 XIV.
- 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? . . . . .  Yes  No

**Part IV Trust, Escrow and Custodial Arrangements.** Complete if 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? . . . . .  Yes  No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- |   | Amount  |
|---|---------|
| c Beginning balance . . . . .             | 15,440. |
| d Additions during the year . . . . .     | 44,475. |
| e Distributions during the year . . . . . | 37,848. |
| f Ending balance . . . . .                | 22,067. |
- 2a Did the organization include an amount on Form 990, Part X, line 21? . . . . .  Yes  No
- b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance . . . . .	439,934.				
b Contributions . . . . .	42,711.				
c Investment earnings or losses . . . . .	-76,042.				
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .	406,603.				

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment  %
  - b Permanent endowment  69.6380 %
  - c Term endowment  30.3620 %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                                       | Yes                      | No                                  |
|---------------------------------------|--------------------------|-------------------------------------|
| (i) unrelated organizations . . . . . | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations . . . . .  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .  Yes  No
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .				
d Equipment . . . . .		125,147.	82,870.	42,277.
e Other . . . . .				
<b>Total.</b> Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .				42,277.



Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Table with 10 rows for reconciliation of net assets. Line 1: Total revenue 2,478,104. Line 2: Total expenses 2,687,231. Line 3: Excess or (deficit) for the year -209,127. Line 4: Net unrealized gains (losses) on investments -352,070. Line 9: Total adjustments (net) -352,070. Line 10: Excess or (deficit) for the year per financial statements -561,197.

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

Table with 5 main rows for revenue reconciliation. Line 1: Total revenue 2,227,150. Line 2e: Add lines 2a through 2d -352,070. Line 3: Subtract line 2e from line 1 2,579,220. Line 4c: Add lines 4a and 4b -101,116. Line 5: Total revenue 2,478,104.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Table with 5 main rows for expense reconciliation. Line 1: Total expenses 2,788,347. Line 2e: Add lines 2a through 2d 101,116. Line 3: Subtract line 2e from line 1 2,687,231. Line 4c: Add lines 4a and 4b. Line 5: Total expenses 2,687,231.

Part XIV 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; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

SEE PAGE 5

Series of horizontal dashed lines provided for entering supplemental information.

**Part XIV** Supplemental Information (continued)

SCHEDULE D, PART V, QUESTION 4

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

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

SCHEDULE D, PART XII, QUESTION 4B

\$56,145 IS THE RENTAL DEPRECIATION EXPENSE RECOGNIZED ON PART VIII OF FORM 990.

\$44,971 IS THE COST OF GOODS SOLD RECOGNIZED ON PART VIII OF FORM 990.

SCHEDULE D, PART XIII, QUESTION 2D

\$56,145 IS THE RENTAL DEPRECIATION EXPENSE RECOGNIZED ON PART VIII OF FORM 990.

\$44,971 IS THE COST OF GOODS SOLD RECOGNIZED ON PART VIII OF FORM 990.

**Part XIV** Supplemental Information (continued)

SCHEDULE D, PART IV, QUESTION 1B

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

**Schedule F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

Employer identification number

SOCIETY OF BIBLICAL LITERATURE

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 the grants or 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 IV the organization's procedures for monitoring the use of grant funds outside the United States.

**3 Activities per Region.** (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
EUROPE	NONE	NONE	PROGRAM SERVICES	CONFERENCE	8,415.
EAST ASIA AND THE PACIFIC	NONE	NONE	PROGRAM SERVICES	CONFERENCE	30,098.
<b>Totals . . . . . ▶</b>	NONE	NONE			38,513.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2008





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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TRAVEL GRANT TO ATTEND CONFERENCE	SUB-SAHARAN AFRICA	1	2,525.	CASH		N/A	N/A
TRAVEL GRANT TO ATTEND CONFERENCE	EAST ASIA/PACIFIC	2	3,393.	CASH		N/A	N/A
TRAVEL GRANT TO ATTEND CONFERENCE	EUROPE/ICELAND/GREENLAND	1	1,625.	CASH		N/A	N/A

**Part IV** Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE F, PART I, QUESTION 2

GRANTS PROVIDED TO BRING MEMBERS OUTSIDE THE US TO SBL'S MEETINGS ARE MONITORED FOR PROPER USE OF FUNDS BY NOT PROVIDING THE FUNDS UNTIL AN INDIVIDUAL ATTENDS THE MEETING OR BY PURCHASING A TICKET ON THEIR BEHALF TO COME TO THE MEETING.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No. 1545-0047

**2008**

**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 checked="" 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 line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

**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 organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <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:

**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 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.**

**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 Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

	Yes	No
<b>1b</b>	X	
<b>2</b>		X
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X

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

Schedule J (Form 990) 2008

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
KENT HAROLD RICHARDS	(i)	85,470.	NONE	NONE	13,392.	52,521.	151,383.	NONE
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

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

SCHEDULE J, PART I, QUESTION 1A

MR. RICHARDS RECEIVES A HOUSING ALLOWANCE IN THE AMOUNT OF \$41,214.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

OMB No. 1545-0047

**2008**

**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 ANNUAL CONFERENCES HELD EACH YEAR - ONE IN THE UNITED STATES AND ONE ABROAD. CONFERENCES SERVE MEMBERS AND REACH DIVERSE AUDIENCES BY PROVIDING OPPORTUNITIES FOR INTELLECTUAL AND PROFESSIONAL DEVELOPMENT, FACILITATING BROAD DISCUSSIONS, AND COLLABERATING WITH MANY INSTITUTIONS AND ORGANIZATIONS. IN MANY CASES RESOURCES ARE DEVELOPED AS A RESULT OF THESE CONFERENCES.

Name of the organization SOCIETY OF BIBLICAL LITERATURE	Employer identification number 23-6390716
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FORM 990, PART III, QUESTION 4B

PUBLICATIONS - SBL IS A MEMBER OF THE ASSOCIATION OF AMERICAN UNIVERSITY

PUBLISHERS THAT HELPS SET STANDARDS REGARDING PEER REVIEWED PUBLICATIONS.

SBL PUBLICATIONS IS INVOLVED IN EVERY PHASE OF PRODUCING BOOKS;

ACQUISTION, DEVELOPMENT, PRODUCTION, AND MARKETING. THIS SUPPORTS

PROFESSIONAL DEVELOPMENT, FACILITATES OPEN DISCUSSION, ENCOURAGES

BIBLICAL RESEARCH AND STUDY, AND IS ADDRESSED TO DIVERSE AUDIENCES (MORE

OF A FOCUS ON THE ACADEMIC MARKET).

Name of the organization SOCIETY OF BIBLICAL LITERATURE	Employer identification number 23-6390716
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FORM 990, PART III, QUESTION 4C

PROFESSIONS - PROFESSIONS INCLUDE A BROAD RANGE OF ACTIVITIES THAT SUPPORT PROFESSIONAL DEVELOPMENT, FACILITATE OPEN DISCUSSION, AND ENCOURAGE THE STUDY OF THE BIBLE. SBL COLLABORATES WITH THE NATIONAL HUMANITIES ALLIANCE AND AMERICAN COUNCIL OF LEARNED SOCIETIES; ORGANIZATIONS THAT FUNCTION AS A CONSORTIUM FOR HUMANITIES ACTIVITIES. IN ADDITION, SBL HAS ESTABLISHED PARTNERSHIPS WITH CONSORTIA OF COLLEGES, UNIVERSITIES, AND SEMINARIES AS WELL AS WITH INDIVIDUAL HIGHER EDUCATION INSTITUTIONS.



Name of the organization SOCIETY OF BIBLICAL LITERATURE	Employer identification number 23-6390716
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FORM 990, PART III, QUESTION 4D

OTHER PROGRAMS INCLUDE MEMBERSHIP, REGIONS, AND RESEARCH AND TECHNOLOGY. MEMBERSHIP RELATES TO THE MEMBERS OF THE ORGANIZATION AND THE SERVICES PROVIDED ON BEHALF OF THOSE MEMBERS. REGIONS RELATES TO THE PROMOTION OF SBL THROUGH REGIONAL MEETINGS AND THE SUPPORT OF THOSE MEETINGS, WHILE RESEARCH AND TECHNOLOGY PROVIDES THE BACKBONE OF EVERY DIMENSION OF THE ORGANIZATION FROM ADMINISTRATIVE COORDINATION TO HIGHLY TECHNICAL SUPPORT FOR PROJECTS. IN ADDITION RESEARCH AND TECHNOLOGY IS RESPONSIBLE FOR THE MAINTENANCE OF THE WEBSITE AND MEMBERSHIP DATABASE WHICH HELPS SUPPORT THE FUNCTIONS OF THE ORGANIZATION.

Name of the organization SOCIETY OF BIBLICAL LITERATURE	Employer identification number 23-6390716
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FORM 990, PART VI, SECTION A, QUESTION 10

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 WE BE SENT A PASSWORD PROTECTED ELECTRONIC COPY OF THE RETURN.

Name of the organization

Employer identification number

SOCIETY OF BIBLICAL LITERATURE

23-6390716

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.

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

Name of the organization SOCIETY OF BIBLICAL LITERATURE	Employer identification number 23-6390716
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FORM 990, PART VI, SECTION C, QUESTION 19

THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY  
 ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FINANCIAL STATEMENTS ARE  
 PUBLISHED ANNUALLY ON THE SBL WEBSITE, GUIDESTAR, AND ARE ALSO AVAILABLE  
 UPON REQUEST.

Name of the organization

Employer identification number

SOCIETY OF BIBLICAL LITERATURE

23-6390716

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

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

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

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

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

BEHALF OF THE ORGANIZATION.

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

FORM 990, PART III, QUESTION 1

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.

MISSION STATEMENT:

FOSTER BIBLICAL SCHOLARSHIP

STRATEGIC VISION STATEMENTS:

- ADVANCE THE ACADEMIC STUDY OF BIBLICAL LITERATURE AND ITS CULTURAL CONTEXTS
- COLLABORATE WITH EDUCATIONAL INSTITUTIONS AND OTHER APPROPRIATE

Name of the organization

Employer identification number

SOCIETY OF BIBLICAL LITERATURE

23-6390716

ORGANIZATIONS TO SUPPORT BIBLICAL SCHOLARSHIP AND TEACHING

•DEVELOP RESOURCES FOR DIVERSE AUDIENCES, INCLUDING STUDENTS, RELIGIOUS

COMMUNITIES AND THE GENERAL PUBLIC

•FACILITATE BROAD AND OPEN DISCUSSION FROM A VARIETY OF PERSPECTIVES

•OFFER MEMBERS OPPORTUNITIES FOR MUTUAL SUPPORT, INTELLECTUAL GROWTH, AND

PROFESSIONAL DEVELOPMENT AS TEACHERS AND SCHOLARS

•ORGANIZE CONGRESSES FOR SCHOLARLY EXCHANGE

•PUBLISH BIBLICAL SCHOLARSHIP



## FORM 990, PART III, LINE 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.

SEE SCHEDULE O FOR THE COMPLETE MISSION.

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

=====

DESCRIPTION -----	GRANTS -----	EXPENSES -----	REVENUE -----
MEMBERSHIP		132,095.	461,346.
RESEARCH AND TECHNOLOGY		121,418.	1,500.
REGIONS		87,160.	NONE
	-----	-----	-----
TOTALS		340,673.	462,846.
	=====	=====	=====

FORM 990, PART VIII - INVESTMENT INCOME

=====

DESCRIPTION -----	(A) TOTAL REVENUE -----	(B) RELATED OR EXEMPT REVENUE -----	(C) UNRELATED BUSINESS REV. -----	(D) EXCLUDED REVENUE -----
INTEREST INCOME	19,122.			19,122.
DIVIDEND INCOME	13,787.			13,787.
	-----	-----	-----	-----
TOTALS	32,909.			32,909.
	=====	=====	=====	=====

FORM 990, PART VIII - INCOME FROM INVESTMENT OF TE BOND PROCEEDS

=====

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
-----	-----	-----	-----	-----
US TREASURY BOND INCOME	316.			316.
TOTALS	316.			316.
	=====	=====	=====	=====

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

=====

GROSS SALES LESS RETURNS AND ALLOWANCES .....	396,836.
INVENTORY AT BEGINNING OF YEAR .....	
PURCHASES .....	
SALARIES AND WAGES .....	
OTHER COSTS .....	
	-----
SUBTOTAL .....	
MINUS ENDING INVENTORY .....	
	-----
COST OF GOODS SOLD .....	44,971.
	=====

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
PREPAID EXPENSES	27,691.
TOTALS	----- 27,691. =====

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	COST OR FMV -----
CORPORATE STOCKS	176,550.	FMV
US GOVERNMENT OBLIGATIONS	504,374.	FMV
	-----	
TOTALS	680,924.	
	=====	

FORM 990, PART X - DEFERRED REVENUE

=====

DESCRIPTION  
-----

ENDING  
BOOK VALUE  
-----

DEFERRED REVENUE

1,135,453.

TOTALS

-----  
1,135,453.  
=====



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

▶ **Attach to your tax return.** ▶ **See separate instructions.**

Name(s) shown on return  <b>SOCIETY OF BIBLICAL LITERATURE</b>	Identifying number  23-6390716
--	--------------------------------------

**1** Enter the gross proceeds from sales or exchanges reported to you for 2008 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)
	SEE STATEMENT 1						-13,013.

**3** Gain, if any, from Form 4684, line 45 . . . . . **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** align="right">-13,013.

**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**

**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** align="right">( 13,013.)

**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 37 and 44a . . . . . **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** align="right">-13,013.

**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 41, 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**

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

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)		
A				
B				
C				
D				
<b>These columns relate to the properties on lines 19A through 19D. ▶</b>	<b>Property A</b>	<b>Property B</b>	<b>Property C</b>	<b>Property D</b>
20 Gross sales price (Note: See line 1 before completing.)	20			
21 Cost or other basis plus expense of sale . . . . .	21			
22 Depreciation (or depletion) allowed or allowable . . . . .	22			
23 Adjusted basis. Subtract line 22 from line 21 . . . . .	23			
24 Total gain. Subtract line 23 from line 20 . . . . .	24			
<b>25 If section 1245 property:</b>				
a Depreciation allowed or allowable from line 22 . . . . .	25a			
b Enter the smaller of line 24 or 25a . . . . .	25b			
<b>26 If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.				
a Additional depreciation after 1975 (see instructions) . . . . .	26a			
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions) . . . . .	26b			
c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e . . . . .	26c			
d Additional depreciation after 1969 and before 1976 . . . . .	26d			
e Enter the smaller of line 26c or 26d . . . . .	26e			
f Section 291 amount (corporations only) . . . . .	26f			
g Add lines 26b, 26e, and 26f . . . . .	26g			
<b>27 If section 1252 property:</b> Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).				
a Soil, water, and land clearing expenses . . . . .	27a			
b Line 27a multiplied by applicable percentage (see instructions) . . . . .	27b			
c Enter the smaller of line 24 or 27b . . . . .	27c			
<b>28 If section 1254 property:</b>				
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, and mining exploration costs (see instructions) . . . . .	28a			
b Enter the smaller of line 24 or 28a . . . . .	28b			
<b>29 If section 1255 property:</b>				
a Applicable percentage of payments excluded from income under section 126 (see instructions) . . . . .	29a			
b Enter the smaller of line 24 or 29a (see instructions) . . . . .	29b			

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

30 Total gains for all properties. Add property columns A through D, line 24 . . . . .	30	
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13 . . . . .	31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 39. Enter the portion from other than casualty or theft on Form 4797, line 6 . . . . .	32	

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

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years . . . . .	33	
34 Recomputed depreciation (see instructions) . . . . .	34	
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report . . . . .	35	



**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  
3,749,590.

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 page 9 of instructions.  
350  
825 HOUSTON MILL ROAD

City or town, state, and ZIP code  
ATLANTA, GA 30329

**D** Employer identification number  
 (Employees' trust, see instructions for Block D on page 9.)  
23-6390716

**E** Unrelated business activity codes  
 (See instructions for Block E on page 9.)

**F** Group exemption number (See instructions for Block F on page 9.)

**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
1 a	Gross receipts or sales			
b	Less returns and allowances			
	c Balance	1 c		
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4 a	Capital gain net income (attach Schedule D)	4 a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4 b		
c	Capital loss deduction for trusts	4 c		
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 page 11 of the instructions; attach schedule.)	12		
13	<b>Total.</b> Combine lines 3 through 12	13		

**Part II Deductions Not Taken Elsewhere** (See page 11 of the 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 schedule)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See page 13 of the instructions for limitation rules.)	20	
21	Depreciation (attach Form 4562)	21	NONE
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	22b NONE
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 schedule)	28	
29	<b>Total deductions.</b> Add lines 14 through 28	29	NONE
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	NONE
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	NONE
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)	33	
34	<b>Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	NONE

**Part III Tax Computation**

**35 Organizations Taxable as Corporations.** See instructions for tax computation on page 15.  
 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** NONE

**36 Trusts Taxable at Trust Rates.** See instructions for tax computation on page 16. Income tax on the amount on line 34 from:  Tax rate schedule or  Schedule D (Form 1041) . . . . . **36**

**37 Proxy tax.** See page 16 of the instructions . . . . . **37**

**38 Alternative minimum tax** . . . . . **38**

**39 Total.** Add lines 37 and 38 to line 35c or 36, whichever applies . . . . . **39** NONE

**Part IV Tax and Payments**

**40 a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) . . . . . **40a**

**b** Other credits (see page 17 of the instructions) . . . . . **40b**

**c** General business credit. Attached Form 3800 . . . . . **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** NONE

**42** Other taxes. Check if from:  Form 4255  Form 8611  Form 8697  Form 8866  Other (attach schedule) . . . . . **42**

**43 Total tax.** Add lines 41 and 42 . . . . . **43** NONE

**44 a** Payments: A 2007 overpayment credited to 2008 . . . . . **44a**

**b** 2008 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** Other credits and payments:  Form 2439 \_\_\_\_\_  Form 4136 \_\_\_\_\_  Other \_\_\_\_\_ Total **44f**

**45 Total payments.** Add lines 44a through 44f . . . . . **45**

**46** Estimated tax penalty (see page 4 of the 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** NONE

**48 Overpayment.** If line 45 is larger than the total of lines 43 and 46, enter amount overpaid . . . . . **48** NONE

**49** Enter the amount of line 48 you want: **Credited to 2009 estimated tax**  **Refunded**  **49** NONE

**Part V Statements Regarding Certain Activities and Other Information** (see instructions on page 18)

**1** At any time during the 2008 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? . . . . . **Yes** **No**

If YES, see page 5 of the instructions for other forms the organization may have to file.

**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

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

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 \_\_\_\_\_

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

**Paid Preparer's Use Only**

Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check if self-employed  Preparer's SSN or PTIN P00746804

Firm's name (or yours if self-employed), address, and ZIP code **SMITH & HOWARD, P.C.** EIN 58-1250486  
 171 17TH STREET, SUITE 900 Phone no. 404-874-6244  
 ATLANTA, GA 30363

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

(see instructions on page 19)

1 Description of property

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

Table for Schedule C with columns for Rent received or accrued (a, b), Deductions (3a), and Total income (c).

Schedule E - Unrelated Debt-Financed Income (see instructions on page 19)

Table for Schedule E with columns for Description of debt-financed property, Gross income, Deductions (a, b), and Allocated deductions.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions on page 20)

Table for Schedule F - Exempt Controlled Organizations with columns for Name of organization, Employer ID, Net unrelated income, Total of specified payments, Part of column 4, and Deductions.

Table for Schedule F - Nonexempt Controlled Organizations with columns for Taxable Income, Net unrelated income, Total of specified payments, Part of column 9, and Deductions.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions on page 21)

Table with 5 columns: 1 Description of income, 2 Amount of income, 3 Deductions directly connected, 4 Set-asides, 5 Total deductions and set-asides. Includes rows (1)-(4) and a Totals row.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions on page 21)

Table with 7 columns: 1 Description of exploited activity, 2 Gross unrelated business income, 3 Expenses directly connected, 4 Net income, 5 Gross income, 6 Expenses attributable, 7 Excess exempt expenses. Includes rows (1)-(4) and a Totals row.

Schedule J - Advertising Income (see instructions on page 21)

Part I Income From Periodicals Reported on a Consolidated Basis

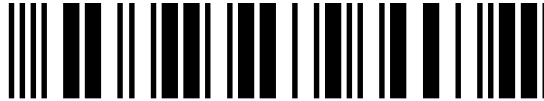
Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss), 5 Circulation income, 6 Readership costs, 7 Excess readership costs. Includes rows (1)-(4) and a Totals row.

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.)

Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss), 5 Circulation income, 6 Readership costs, 7 Excess readership costs. Includes rows (1)-(4) and a Totals row.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 22)

Table with 4 columns: 1 Name, 2 Title, 3 Percent of time devoted to business, 4 Compensation attributable to unrelated business. Includes a Total row.



0901601413

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

Change of Address

<b>Exempt Organization Unrelated Business Income Tax Return</b> (Under Georgia Code Section 48-7-25)	20 <u>08</u>
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For the taxable year beginning 07/01, 20 08 and ending 06/30, 20 09

Name of Organization <u>SOCIETY OF BIBLICAL LITERATURE</u>	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.) <u>23-6390716</u>
Number and Street <u>825 HOUSTON MILL ROAD</u>	
City or Town, State and Zip Code <u>ATLANTA, GA 30329</u>	Date of current exemption letter and IRS code section under which you are exempt. <u>SEC. 501 (C)(3 )</u>
Name and Address of Trust's Fiduciary	<b>SCHEDULE 1</b>

1. Unrelated business taxable income from Federal Form 990-T (attach copy)	NONE
2. Additions	
3. Total (add line 1 and line 2)	NONE
4. Subtractions	
5. Georgia unrelated business taxable income (line 3 less line 4)	NONE

<b>COMPUTATION OF GEORGIA UNRELATED BUSINESS INCOME TAX</b>		<b>SCHEDULE 2</b>
1. Line 5, above, multiplied by 6%		NONE
2. Less: Credits and Payments		
3. Withholding Credits (G2-A and/or G-2RP)		
4. Balance of tax due OR overpayment		NONE
5. Interest due (see instructions)		
6. Penalties due (see instructions)		
7. Balance of tax, interest and penalties due with return		NONE
8. If line 4 is an overpayment, amount is to be credited on 20 <u>09</u>		
<b>Estimated Tax</b> ▶ _____	<b>Refunded</b> ▶ _____	NONE

**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.

SMITH & HOWARD, P.C.

\_\_\_\_\_  
 Signature of Officer

\_\_\_\_\_  
 Signature of Individual or Firm Preparing Return

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Date

P00746804

\_\_\_\_\_  
 Employee ID or Social Security Number



**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  
3,749,590.

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 page 9 of instructions.  
350

825 HOUSTON MILL ROAD

City or town, state, and ZIP code  
ATLANTA, GA 30329

**D** Employer identification number  
 (Employees' trust, see instructions for Block D on page 9.)  
23-6390716

**E** Unrelated business activity codes  
 (See instructions for Block E on page 9.)

**F** Group exemption number (See instructions for Block F on page 9.)

**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
1 a	Gross receipts or sales			
b	Less returns and allowances			
	c Balance	1 c		
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4 a	Capital gain net income (attach Schedule D)	4 a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4 b		
c	Capital loss deduction for trusts	4 c		
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 page 11 of the instructions; attach schedule.)	12		
13	<b>Total.</b> Combine lines 3 through 12	13		

**Part II Deductions Not Taken Elsewhere** (See page 11 of the 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 schedule)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See page 13 of the instructions for limitation rules.)	20	
21	Depreciation (attach Form 4562)	21	NONE
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	22b NONE
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 schedule)	28	
29	<b>Total deductions.</b> Add lines 14 through 28	29	NONE
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	NONE
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	NONE
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)	33	
34	<b>Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	NONE

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation on page 15. 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 NONE
36 Trusts Taxable at Trust Rates. See instructions for tax computation on page 16. Income tax on the amount on line 34 from:  Tax rate schedule or  Schedule D (Form 1041)
36
37 Proxy tax. See page 16 of the instructions
37
38 Alternative minimum tax
38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies
39 NONE

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a
b Other credits (see page 17 of the instructions) 40b
c General business credit. Attached Form 3800 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 NONE
42 Other taxes. Check if from:  Form 4255  Form 8611  Form 8697  Form 8866  Other (attach schedule). 42
43 Total tax. Add lines 41 and 42 43 NONE
44 a Payments: A 2007 overpayment credited to 2008 44a
b 2008 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 Other credits and payments:  Form 2439  Form 4136  Other Total 44f
45 Total payments. Add lines 44a through 44f 45
46 Estimated tax penalty (see page 4 of the 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 NONE
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid 48 NONE
49 Enter the amount of line 48 you want: Credited to 2009 estimated tax Refunded 49 NONE

Part V Statements Regarding Certain Activities and Other Information (see instructions on page 18)

1 At any time during the 2008 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?
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 schedule) 4a
b Other costs (attach schedule) 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
May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

Paid Preparer's Use Only Preparer's signature Date Check if self-employed Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code SMITH & HOWARD, P.C. 171 17TH STREET, SUITE 900 ATLANTA, GA 30363
EIN 58-1250486
Phone no. 404-874-6244

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

(see instructions on page 19)

1 Description of property

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

Table for Schedule C with columns for Rent received or accrued (a, b), Deductions (3a), and Total income (c).

Schedule E - Unrelated Debt-Financed Income (see instructions on page 19)

Table for Schedule E with columns for Description of debt-financed property, Gross income, Deductions (a, b), and Allocated deductions.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions on page 20)

Table for Schedule F - Exempt Controlled Organizations with columns for Name of organization, Employer ID, Net unrelated income, Total of specified payments, Part of column 4, and Deductions.

Table for Schedule F - Nonexempt Controlled Organizations with columns for Taxable Income, Net unrelated income, Total of specified payments, Part of column 9, and Deductions.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions on page 21)

Table with 5 columns: 1 Description of income, 2 Amount of income, 3 Deductions directly connected, 4 Set-asides, 5 Total deductions and set-asides. Includes rows (1)-(4) and a Totals row.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions on page 21)

Table with 7 columns: 1 Description of exploited activity, 2 Gross unrelated business income, 3 Expenses directly connected, 4 Net income, 5 Gross income, 6 Expenses attributable, 7 Excess exempt expenses. Includes rows (1)-(4) and a Totals row.

Schedule J - Advertising Income (see instructions on page 21)

Part I Income From Periodicals Reported on a Consolidated Basis

Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss), 5 Circulation income, 6 Readership costs, 7 Excess readership costs. Includes rows (1)-(4) and a Totals row.

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.)

Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss), 5 Circulation income, 6 Readership costs, 7 Excess readership costs. Includes rows (1)-(4) and a Totals row.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 22)

Table with 4 columns: 1 Name, 2 Title, 3 Percent of time devoted to business, 4 Compensation attributable to unrelated business. Includes a Total row.