

Form **8879-EO**

# IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2014, or fiscal year beginning 07/01, 2014, and ending 06/30, 20 15

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

▶ Information about Form 8879-EO and its instructions is at [www.irs.gov/form8879eo](http://www.irs.gov/form8879eo).

# 2014

Department of the Treasury  
Internal Revenue Service

Name of exempt organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

Name and title of officer

JULIA OLIVER, SVP, CFO

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

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

1a	Form 990 check here	▶	<input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>369427311.</u>
2a	Form 990-EZ check here	▶	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a	Form 1120-POL check here	▶	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	_____
4a	Form 990-PF check here	▶	<input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	_____
5a	Form 8868 check here	▶	<input type="checkbox"/>	b	Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	_____

### Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize GRANT THORNTON LLP to enter my PIN 

2	6	2	3	4
---	---	---	---	---

 as my signature  
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ Julia A. Oliver

Date ▶ 2/24/2016

### Part III Certification and Authentication

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

2	3	6	9	5	3	3	6	6	0	5
---	---	---	---	---	---	---	---	---	---	---

  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ [Signature]

Date ▶ 2/25/2016

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

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2014)

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

# 2014

**Open to Public Inspection**

**A** For the **2014** calendar year, or tax year beginning **07/01, 2014**, and ending **06/30, 2015**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>AMERICAN BIBLE SOCIETY</b>			<b>D</b> Employer identification number <b>13-1623885</b>	
	Doing Business As			<b>E</b> Telephone number <b>(215) 309-0300</b>	
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite		
	101 N. INDEPENDENCE MALL EAST FL8 City or town, state or province, country, and ZIP or foreign postal code <b>PHILADELPHIA, PA 19106-2155</b>			<b>G</b> Gross receipts \$ <b>1,003,228,651.</b>	
<b>F</b> Name and address of principal officer: <b>ROY LAWRENCE PETERSON</b> 101 N. INDEPENDENCE MALL EAST PHILADELPHIA, PA 19106			<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			If "No," attach a list. (see instructions)		
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			<b>H(c)</b> Group exemption number ▶		
<b>J</b> Website: ▶ <b>WWW.AMERICANBIBLE.ORG</b>					
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation: <b>1816</b> <b>M</b> State of legal domicile: <b>NY</b>		

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>TO MAKE THE BIBLE AVAILABLE TO EVERY PERSON IN A LANGUAGE AND FORMAT EACH CAN UNDERSTAND AND AFFORD, SO ALL PEOPLE MAY EXPERIENCE ITS LIFE-CHANGING MESSAGE.</u>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>18.</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>17.</b>
	<b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a)	<b>5</b>	<b>309.</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>200.</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>835,281.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	39,913,323.	59,321,159.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	42,245,515.	30,477,788.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,450,212.	279,628,364.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	88,609,050.	369,427,311.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	6,557,925.	5,659,491.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	30,546,681.	35,864,081.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>10,750,798.</b>	713,119.	779,697.
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	42,052,987.	46,020,394.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	79,870,712.	88,323,663.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	8,738,338.	281,103,648.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	528,448,319.	801,150,780.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	92,569,504.	114,594,355.
		435,878,815.	686,556,425.

**COPY FOR PUBLIC INSPECTION**

## 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 Use Only</b>	Print/Type preparer's name <b>FRANK GIARDINI</b>	Preparer's signature <i>Frank Giardini</i>	Date <b>2/25/2016</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00532355</b>
	Firm's name ▶ <b>GRANT THORNTON LLP</b>	Firm's EIN ▶ <b>36-6055558</b>			
	Firm's address ▶ <b>2001 MARKET STREET, SUITE 700 PHILADELPHIA, PA 19103</b>	Phone no. <b>215-561-4200</b>			

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III  Yes  No

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

ATTACHMENT 1

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  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 organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 66,520,979. including grants of \$ 5,659,491. ) (Revenue \$ )

ATTACHMENT 2

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶ 66,520,979.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows include questions 1 through 20b regarding organizational requirements and reporting.

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

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i> . . . . .	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i> . . . . .		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i> . . . . .	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i> . . . . .		X
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) 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> . . . . .		X
<b>25b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i> . . . . .		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i> . . . . .		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .	X	
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>28c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<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 sections 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, Part II, III, or IV, and Part V, line 1.</i> . . . . .	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	X	
<b>35b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		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
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. . . . .	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [X]

Table with columns for line number, description, and Yes/No checkboxes. Includes lines 1a-1c, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, 14a-14b.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 4 columns: Question, Line Number, Yes, No. Rows include 1a (18), 1b (17), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 4 columns: Question, Line Number, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 4
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:▶

SAEED AHMED 101 NO. INDEPENDENCE MALL EAST FL8 PHILADELPHIA, PA 19106-2155 215-309-0900

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NICK ATHENS CHAIRMAN	11.00 0	X		X				0	0	0
(2) ELIZABETH PEALE ALLEN VICE CHAIRMAN	7.00 0	X		X				0	0	0
(3) CHERYL HOLLAND RECORDING SECRETARY/TREASURER	7.00 0	X		X				0	0	0
(4) KATHERINE BARNHART TRUSTEE	3.00 0	X						0	0	0
(5) THOMAS BINDLEY TRUSTEE	9.00 0	X						0	0	0
(6) JEFF BROWN TRUSTEE	4.00 0	X						0	0	0
(7) VICTOR CARDENAS TRUSTEE	3.00 0	X						0	0	0
(8) REBECCA CONTRERAS TRUSTEE	6.00 0	X						0	0	0
(9) PIETER DEAROLF TRUSTEE	4.00 0	X						0	0	0
(10) TESSIE DEVORE TRUSTEE	3.00 0	X						0	0	0
(11) JERRY DIMITRIOU TRUSTEE	3.00 0	X						0	0	0
(12) MARK HANSON TRUSTEE	3.00 0	X						0	0	0
(13) KAREN LOUIE TRUSTEE	6.00 0	X						0	0	0
(14) PAUL A. SOUKUP S.J. TRUSTEE	6.00 0	X						0	0	0



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) SHARON WATSON FLUKER TRUSTEE	4.00 0	X					0	0	0	
16) DARRELL L. WHITEMAN TRUSTEE	4.00 0	X					0	0	0	
17) ANGELA WILLIAMS TRUSTEE	3.00 0	X					0	0	0	
18) JAMES EASTMAN TRUSTEE (THROUGH 6/19/15)	2.00 0	X					0	0	0	
19) HARVEY HOSKINS TRUSTEE (THROUGH 6/19/15)	6.00 0	X					0	0	0	
20) FRANK M. TAYLOR III TRUSTEE (THROUGH 6/19/15)	2.00 0	X					0	0	0	
21) DAVID TROBISCH TRUSTEE (THROUGH 6/19/15)	2.00 0	X					0	0	0	
22) ROY L PETERSON PRESIDENT & CEO	40.00 0	X		X			341,069.	0	47,968.	
23) ROBERT BRIGGS SVP	40.00 0			X			214,291.	0	56,094.	
24) DONALD CAVANAUGH CORP SEC/CAE (THROUGH 9/30/15)	40.00 0			X			161,349.	0	60,744.	
25) MARK DILLON SVP (THROUGH 6/30/15)	40.00 0			X			345,195.	0	52,716.	
<b>1b Sub-total</b>							0	0	0	
<b>c Total from continuation sheets to Part VII, Section A</b>							3,427,036.	0	829,514.	
<b>d Total (add lines 1b and 1c)</b>							3,427,036.	0	829,514.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **65**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 5		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **50**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 26) STEPHEN D. KING SVP, COO (THROUGH 12/23/15)	40.00 0			X				222,368.	0	54,223.
( 27) GEOFFREY MORIN SVP	40.00 0			X				214,309.	0	52,476.
( 28) JULIA A. OLIVER SVP, CFO	40.00 0			X				209,533.	0	58,264.
( 29) LAURA DABKOWSKI SVP (START 12/15/14)	40.00 0			X				0	0	0
( 30) MARCO HERRERA DIRECTOR	40.00 0				X			160,655.	0	38,498.
( 31) LEE MANIS DIRECTOR	40.00 0				X			168,698.	0	53,111.
( 32) NICHOLAS PAGANO DIRECTOR	40.00 0				X			163,839.	0	62,979.
( 33) JAMES PUCHY CHIEF OF STAFF	40.00 0				X			180,525.	0	40,791.
( 34) PETER RATHBUN GENERAL COUNSEL	40.00 0				X			188,156.	0	41,703.
( 35) MARK FORSHAW DIRECTOR	40.00 0					X		162,194.	0	49,628.
( 36) NIKOLAOS GARBIDAKIS DIRECTOR	40.00 0					X		181,067.	0	59,956.
<b>1b Sub-total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .										

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 65

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include JANET GRELL, MARIO PAREDES, and STEPHEN SHARP.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 65

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

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

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

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b> 41,343.					
	<b>b</b> Membership dues . . . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1c</b> 52,627.					
	<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> 59,227,189.					
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ . . . . .	423,878.					
	<b>h Total.</b> Add lines 1a-1f . . . . .	▶ 59,321,159.					
<b>Program Service Revenue</b>	<b>2a</b> _____	<b>Business Code</b>					
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue . . . . .						
	<b>g Total.</b> Add lines 2a-2f . . . . .	▶ 0					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts). . . . .	▶ 7,577,463.				835,281.	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .	▶ 0					
	<b>5</b> Royalties . . . . .	▶ 1,654,940.					
	<b>6a</b> Gross rents . . . . .	(i) Real					
		(ii) Personal					
	<b>b</b> Less: rental expenses . . . . .	2,423,721.					
	<b>c</b> Rental income or (loss) . . . . .	678,407.					
	<b>d</b> Net rental income or (loss) . . . . .	▶ 678,407.					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
	<b>b</b> Less: cost or other basis and sales expenses . . . . .	626,656,656.					
	<b>c</b> Gain or (loss) . . . . .	22,900,325.					
	<b>d</b> Net gain or (loss) . . . . .	▶ 22,900,325.					
	<b>8a</b> Gross income from fundraising events (not including \$ 52,627. of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>a</b> 39,878.					
	<b>b</b> Less: direct expenses . . . . .	<b>b</b> 39,878.					
<b>c</b> Net income or (loss) from fundraising events . . . . .	▶ 0						
<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 . . . . .	▶ 0						
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b> 6,235,983.						
	<b>b</b> Less: cost of goods sold . . . . .		<b>b</b> 4,681,085.				
	<b>c</b> Net income or (loss) from sales of inventory . . . . .		▶ 1,554,898.				
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11a</b> GAIN FROM SALE OF BUILDING (SEE SCH O)	900099	274,670,489.					
<b>b</b> GLOBAL SCRIPTURE IMPACT FEES	900099	100,535.					
<b>c</b> MISCELLANEOUS	900099	969,095.					
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .	▶ 275,740,119.						
<b>12 Total revenue.</b> See instructions . . . . .	▶ 369,427,311.	1,069,630.	835,281.	308,201,241.			

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	2,999,058.	2,999,058.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	2,660,433.	2,660,433.		
4 Benefits paid to or for members . . . . .	0			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	3,519,672.	2,446,595.	611,097.	461,980.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7 Other salaries and wages . . . . .	20,310,685.	14,118,364.	3,526,409.	2,665,912.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,001,227.	2,818,480.	682,704.	500,043.
9 Other employee benefits . . . . .	6,299,434.	4,119,088.	1,393,055.	787,291.
10 Payroll taxes . . . . .	1,733,063.	1,203,637.	301,438.	227,988.
11 Fees for services (non-employees):				
a Management . . . . .	0			
b Legal . . . . .	48,931.	20,472.	20,086.	8,373.
c Accounting . . . . .	206,254.		206,254.	
d Lobbying . . . . .	0			
e Professional fundraising services. See Part IV, line 17.	779,697.			779,697.
f Investment management fees . . . . .	2,433,456.		2,433,456.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	6,382,191.	5,994,163.	388,028.	
12 Advertising and promotion . . . . .	0			
13 Office expenses . . . . .	2,772,956.	2,220,996.	292,522.	259,438.
14 Information technology . . . . .	1,991,820.	1,549,156.	37,075.	405,589.
15 Royalties . . . . .	0			
16 Occupancy . . . . .	3,933,958.	2,877,069.	705,787.	351,102.
17 Travel . . . . .	2,148,454.	1,638,219.	214,224.	296,011.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings . . . . .	339,878.	279,124.	32,110.	28,644.
20 Interest . . . . .	0			
21 Payments to affiliates . . . . .	0			
22 Depreciation, depletion, and amortization . . . . .	1,660,540.	1,370,305.	119,448.	170,787.
23 Insurance . . . . .	254,630.	159,736.	30,953.	63,941.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>SCRIPTURE PROGRAM PAYMENTS</u> . . . . .	14,299,809.	14,299,809.		
b <u>PRINTING &amp; PUBLICATIONS</u> . . . . .	6,280,295.	3,823,377.	2,756.	2,454,162.
c <u>POSTAGE &amp; MAILINGS</u> . . . . .	2,875,673.	1,663,555.	11,918.	1,200,200.
d <u>BANK FEES &amp; COMPLIANCE</u> . . . . .	150,626.	69,374.	7,272.	73,980.
e All other expenses . . . . .	240,923.	189,969.	35,294.	15,660.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	88,323,663.	66,520,979.	11,051,886.	10,750,798.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .	8,092,218.	3,884,265.		4,207,953.

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	4,893,528.	<b>1</b>	2,732,337.
	<b>2</b> Savings and temporary cash investments	15,172,057.	<b>2</b>	167,212,731.
	<b>3</b> Pledges and grants receivable, net	0	<b>3</b>	0
	<b>4</b> Accounts receivable, net	4,703,130.	<b>4</b>	44,979,155.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use	5,413,440.	<b>8</b>	2,829,890.
	<b>9</b> Prepaid expenses and deferred charges	1,530,804.	<b>9</b>	5,337,248.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 21,248,046.		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 8,321,629.	3,061,190.	<b>10c</b> 12,926,417.
	<b>11</b> Investments - publicly traded securities	86,446,684.	<b>11</b>	182,576,366.
	<b>12</b> Investments - other securities. See Part IV, line 11	358,103,785.	<b>12</b>	356,942,663.
	<b>13</b> Investments - program-related. See Part IV, line 11	0	<b>13</b>	0
	<b>14</b> Intangible assets	0	<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11	49,123,701.	<b>15</b>	25,613,973.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	528,448,319.	<b>16</b>	801,150,780.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	16,650,555.	<b>17</b>	24,376,263.
	<b>18</b> Grants payable	0	<b>18</b>	0
	<b>19</b> Deferred revenue	5,058,809.	<b>19</b>	5,426,110.
	<b>20</b> Tax-exempt bond liabilities	0	<b>20</b>	0
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	0	<b>21</b>	0
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties	0	<b>24</b>	0
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	70,860,140.	<b>25</b>	84,791,982.
	<b>26 Total liabilities.</b> Add lines 17 through 25	92,569,504.	<b>26</b>	114,594,355.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	349,557,345.	<b>27</b>	604,064,751.
	<b>28</b> Temporarily restricted net assets	44,805,628.	<b>28</b>	41,134,470.
	<b>29</b> Permanently restricted net assets	41,515,842.	<b>29</b>	41,357,204.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	435,878,815.	<b>33</b>	686,556,425.
	<b>34</b> Total liabilities and net assets/fund balances	528,448,319.	<b>34</b>	801,150,780.

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	369,427,311.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	88,323,663.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	281,103,648.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	435,878,815.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-26,343,296.
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-4,082,742.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	686,556,425.

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? .....  
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

**Open to Public Inspection**

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . .
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

Schedule A (Form 990 or 990-EZ) 2014



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

Section A. Public Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (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; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2014 (80.76%); 15 Public support percentage from 2013 Schedule A (78.46%); 16a 33 1/3% support test - 2014 (checked); 16b 33 1/3% support test - 2013; 17a 10%-facts-and-circumstances test - 2014; 17b 10%-facts-and-circumstances test - 2013; 18 Private foundation.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Table with 3 columns: Description, 2014, 2013. Row 15: Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2013 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2014, 2013. Row 17: Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2013 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2014. 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.

19b 33 1/3% support tests - 2013. 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 Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer (b) below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<b>11 a</b>	
<b>b</b> A family member of a person described in (a) above?	<b>11 b</b>	
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	<b>11 c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	<b>1</b>	
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	<b>1</b>	
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	<b>2</b>	
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	<b>3</b>	

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	<b>2a</b>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

**1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>		
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by .035	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>		
<b>2</b> Enter 85% of line 1	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>		
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013 . . . . .			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 <b>Excess distributions carryover to 2015.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013 . . . . .			
e Excess from 2014 . . . . .			

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

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2010	2011	2012	2013	2014	TOTAL
SPECIAL EVENTS	24,809.	29,736.	27,030.	37,325.	39,878.	158,778.
GLOBAL SCRIPTURE IMPACT FEES	117,382.	166,771.	158,922.	282,787.	100,535.	826,397.
MISCELLANEOUS	129,260.	536,732.	86,292.	595,128.	969,095.	2,316,507.
TOTALS	<u>271,451.</u>	<u>733,239.</u>	<u>272,244.</u>	<u>915,240.</u>	<u>1,109,508.</u>	<u>3,301,682.</u>

**Schedule of Contributors**

**2014**

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**  
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
--	--

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 an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).



<b>Name of organization</b> AMERICAN BIBLE SOCIETY	<b>Employer identification number</b> 13-1623885
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**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	----- ----- -----	\$ 4,680,847.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	----- ----- -----	\$ 1,100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	----- ----- -----	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **AMERICAN BIBLE SOCIETY**

Employer identification number

13-1623885

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----

Name of organization **AMERICAN BIBLE SOCIETY**

Employer identification number

13-1623885

**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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

2014

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Open to Public Inspection

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

Name of the organization

Employer identification number

AMERICAN BIBLE SOCIETY

13-1623885

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, aggregate value of grants, aggregate value at end of year, and two questions about donor advisement with Yes/No checkboxes.

Part II Conservation Easements.

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include purpose(s) of conservation easements, total number of easements, total acreage, number of easements on historic structures, and various monitoring and reporting questions.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include questions about reporting art and historical treasures, and amounts required to be reported under SFAS 116 (ASC 958).

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

Schedule D (Form 990) 2014

JSA 4E1268 1.000

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other \_\_\_\_\_
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

**Part V Endowment Funds.** Complete if the 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
<b>1a</b> Beginning of year balance	329,193,203.	309,801,521.	301,074,139.	348,864,480.	305,067,004.
<b>b</b> Contributions	17,854,164.	-2,125,528.	-2,591,703.	-3,467,001.	-4,394,990.
<b>c</b> Net investment earnings, gains, and losses	301,461,750.	66,793,202.	39,129,329.	-6,794,871.	84,601,787.
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs	53,911,443.	43,846,853.	25,979,151.	36,018,810.	34,815,712.
<b>f</b> Administrative expenses	2,276,839.	1,429,139.	1,831,093.	1,509,659.	1,593,609.
<b>g</b> End of year balance	592,320,835.	329,193,203.	309,801,521.	301,074,139.	348,864,480.

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment  95.3569 %
  - b** Permanent endowment  3.2723 %
  - c** Temporarily restricted endowment  1.3708 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
<b>(i)</b> unrelated organizations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>(ii)</b> related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements		9,578,053.	689,183.	8,888,870.
<b>d</b> Equipment		6,812,732.	3,965,158.	2,847,574.
<b>e</b> Other		4,857,261.	3,667,288.	1,189,973.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				12,926,417.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other		
(A) PRIVATE EQUITY	23,940,760.	FMV
(B) REAL ASSETS	38,022,048.	FMV
(C) ABSOLUTE RETURN	73,433,037.	FMV
(D) FIXED INCOME	67,368,973.	FMV
(E) EQUITIES	154,177,845.	FMV
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	356,942,663.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . . ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	26,310,910.
(3) ACCR POST RETIREMENT BENEFITS	35,872,068.
(4) OBLIGATIONS UNDER REMAINDER TR	5,905,458.
(5) PAYABLES UNDER SECURITIES LOAN	3,113,711.
(6) DEFERRED ALLOW FROM LEASE ACTIVITY	13,589,835.
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	84,791,982.

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 369,427,311.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 88,323,663.

**Part XIII Supplemental Information.**

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

SEE PAGE 5

**Part XIII Supplemental Information** (continued)

SCHEDULE D, PART III, LINE 1A

COLLECTIONS OF ART, HISTORICAL TREASURES OR OTHER SIMILAR ASSETS

AMERICAN BIBLE SOCIETY, ("THE BIBLE SOCIETY"), MAINTAINS A RARE SCRIPTURE COLLECTION THAT HAS BEEN ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE BIBLE SOCIETY'S INCEPTION. THE COLLECTION PRESERVES HISTORICALLY SIGNIFICANT SCRIPTURES, PROVIDES FOR SCHOLARLY RESEARCH, AND CONTRIBUTES TO THE PUBLIC GOOD THROUGH EDUCATIONAL EXHIBITIONS.

SCHEDULE D, PART V

ENDOWMENT FUNDS

AMERICAN BIBLE SOCIETY'S ENDOWMENT FUNDS (QUASI & TRUE PERMANENTLY RESTRICTED ENDOWMENT) EXIST TO SUPPORT THE ORGANIZATION'S MISSION. THE UNRESTRICTED FUNDS (QUASI-ENDOWMENT) HELP SUBSIDIZE THE OPERATING BUDGET VIA AN ANNUAL SPENDING FORMULA, WHICH ALLOWS MORE CURRENT DONOR CONTRIBUTIONS TO DIRECTLY FUND PROGRAMS. A SPENDING FORMULA IS ALSO APPLIED TO THE RESTRICTED FUNDS (TRUE ENDOWMENT) WHICH ARE APPROPRIATED FOR BOTH GENERAL AND SPECIFIC PURPOSES AS DESIGNATED BY ORIGINAL DONOR INTENT. AMERICAN BIBLE SOCIETY HAS MAINTAINED THE HISTORICAL PRINCIPAL VALUE ON TRUE ENDOWMENTS.

ON SEPTEMBER 17, 2010, NEW YORK STATE PASSED THE NEW YORK STATE UNIFORM PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT. ALL NOT-FOR-PROFIT ORGANIZATIONS FORMED IN NEW YORK, INCLUDING THE SOCIETY, MUST COMPLY WITH THIS LAW, COMMENCING WITH THE SOCIETY'S 2011 FISCAL YEAR. FROM TIME TO TIME, THE FAIR VALUE OF ASSETS ASSOCIATED WITH AN INDIVIDUAL



**Part XIII** Supplemental Information (continued)

DONOR-RESTRICTED ENDOWMENT FUND MAY FALL BELOW THE FUND'S HISTORIC DOLLAR VALUE.

## SCHEDULE D, PART XI

## RECONCILIATION OF REVENUE

## LINE 2D

COST OF GOODS SOLD	\$4,681,085
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	(6,723,482)
PENSION RELATED ACTIVITY	2,640,740
	-----
TOTAL PART XI, LINE 2(D)	\$ 598,343
	=====

## SCHEDULE D, PART XII

## RECONCILIATION OF EXPENSES

## LINE 2D

COST OF GOODS SOLD	\$4,681,085
--------------------	-------------

## SCHEDULE D, PART X, LINE 2

## FIN 48 (ASC 740)

IN JULY 2006, GUIDANCE WAS ISSUED IN THE AREA OF "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES." THE STANDARD CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS STANDARD PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY

**Part XIII** Supplemental Information (continued)

IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE STANDARD ALSO PROVIDES GUIDANCE ON MEASUREMENT, CLASSIFICATION, INTEREST AND PENALTIES, AND DISCLOSURE. IT WAS EFFECTIVE FOR THE BIBLE SOCIETY ON JULY 1, 2009, AND HAD NO MATERIAL IMPACT ON THE ACCOMPANYING FINANCIAL STATEMENTS. THE TAX YEARS ENDING 2013, 2014 AND 2015 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. THE BIBLE SOCIETY HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS.

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2014**

**Open to Public Inspection**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

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

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

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

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EAST ASIA AND THE PACIFIC			GRANTMAKING	BIBLE DISTRIB & ENGAGE	1,156,690.
(2) EUROPE			GRANTMAKING	BIBLE DISTRIB & ENGAGE	120,000.
(3) MIDDLE EAST AND NORTH AFRICA			GRANTMAKING	BIBLE DISTRIB & ENGAGE	1,280,000.
(4) NORTH AMERICA			GRANTMAKING	BIBLE DISTRIB & ENGAGE	97,211.
(5) SOUTH ASIA			GRANTMAKING	BIBLE DISTRIB & ENGAGE	6,532.
(6) CENTRAL AMERICA/CARIBBEAN			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	809,211.
(7) EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	1,662,691.
(8) EUROPE			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	2,845,958.
(9) MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	1,891,422.
(10) NORTH AMERICA			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	590,298.
(11) RUSSIA/INDEPENDENT STATES			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	223,062.
(12) SOUTH AMERICA			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	1,191,238.
(13) SOUTH ASIA			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	523,926.
(14) SUB-SAHARAN AFRICA			PROGRAM SERVICES	BIBLE DISTRIB & ENGAGE	4,550,732.
(15) EUROPE			INVESTMENTS		2,071,187.
(16) EAST ASIA AND THE PACIFIC			INVESTMENTS		4,416,809.
(17) SOUTH ASIA			INVESTMENTS		1,111,400.
<b>3a Sub-total</b> . . . . .					24,548,367.
<b>b Total from continuation sheets to Part I</b> . . . . .					4,648,407.
<b>c Totals (add lines 3a and 3b)</b>					29,196,774.

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

Schedule F (Form 990) 2014

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2014**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

AMERICAN BIBLE SOCIETY

13-1623885

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

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

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

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EAST ASIA AND THE PACIFIC			INVESTMENTS		2,245,755.
(2) SUB-SAHARAN AFRICA			INVESTMENTS		1,830,677.
(3) MIDDLE EAST AND NORTH AFRICA			INVESTMENTS		246,784.
(4) SOUTH AMERICA			INVESTMENTS		85,041.
(5) NORTH AMERICA			INVESTMENTS		240,150.
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Sub-total . . . . .					
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c Totals</b> (add lines 3a and 3b)					

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

Schedule F (Form 990) 2014

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	BIBLE ENGAGE	29,500.				
(2)			EAST ASIA/PACIFIC	BIBLE ENGAGE	25,000.				
(3)			NORTH AMERICA	BIBLE ENGAGE	9,500.				
(4)			RUSSIA/NEWLY IND. STATES	BIBLE ENGAGE	9,500.				
(5)			SOUTH ASIA	BIBLE ENGAGE	5,500.				
(6)			SUB-SAHARAN AFRICA	BIBLE ENGAGE	7,500.				
(7)			MIDDLE EAST/NORTH AFRICA	BIBLE ENGAGE	810,000.				
(8)			MIDDLE EAST/NORTH AFRICA	BIBLE ENGAGE	50,000.				
(9)			MIDDLE EAST/NORTH AFRICA	BIBLE ENGAGE	420,000.				
(10)			EUROPE/ICELAND/GREENLAND	BIBLE ENGAGE	120,000.				
(11)			EAST ASIA/PACIFIC	BIBLE ENGAGE	1,156,690.				
(12)			NORTH AMERICA	BIBLE ENGAGE	17,244.				
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. . . . . 12.

3 Enter total number of other organizations or entities. . . . .

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

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

**Part V Supplemental Information**

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

SCHEDULE F, PART I, LINE 2

AMERICAN BIBLE SOCIETY ("ABS") IS A MEMBER OF THE UNITED BIBLE SOCIETIES ("UBS"), A WORLD-WIDE FELLOWSHIP OF NATIONAL BIBLE SOCIETIES. ABS PROGRAM SERVICES, IN CONJUNCTION WITH UBS, INCLUDE BIBLE DISTRIBUTION, TRANSLATION, ENGAGEMENT AND ADVOCACY. THE UBS SOLICITS AND RESEARCHES VARIOUS BIBLE DISTRIBUTION PROJECTS PROPOSED BY THE NATIONAL BIBLE SOCIETIES AND MAKES SUCH PROJECTS AVAILABLE TO THE FELLOWSHIP (INCLUDING ABS) FOR FUNDING. ABS SIGNS A RESEARCH AND FUNDING AGREEMENT WITH BENEFICIARIES OF ABS GRANTS. THIS ALLOWS US TO MONITOR AND EVALUATE FUNDS SENT TO EACH COUNTRY. GLOBAL SCRIPTURE IMPACT ("GSI"), OUR INTERNAL RESEARCH GROUP, OR OUR FUNDING PARTNER RESEARCHES PROJECTS BEFORE FUNDING FOR PROJECT IMPACT (LIFE CHANGE), GOAL ALIGNMENT, FINANCIAL RISK, ENVIRONMENTAL RISK, MANAGERIAL RISKS (IMPLEMENTER ON THE GROUND) AND OTHER POSSIBLY INHERENT RISKS. ABS RECEIVES AND REVIEWS PROGRESS REPORTS TO MONITOR THE USE OF FUNDS AS A PROJECT PROGRESSES. AT THE END OF THE PROJECT, GSI OR THE PARTNER CONDUCTS AN ASSESSMENT OF RESULTS TO COMPARE WITH PLAN AND BUDGET. INFORMATION ON RESULTS IS RELAYED TO MANAGEMENT AND THE DONOR CONSTITUENCY. UNUSED FUNDS ARE RETRIEVED FROM THE IMPLEMENTER AND THE DONOR'S PERMISSION IS OBTAINED TO REDIRECT FUNDS TO SIMILAR PROJECTS IN OTHER COUNTRIES. ABS CONDUCTS FIELD VISITS TO VALIDATE AND DOCUMENT INFORMATION. SOME OF THESE VISITS ARE DONE WITH PARTICIPATION OF THE MAJOR DONORS OF THESE MINISTRY PROJECTS. OUR OVERALL INTERNATIONAL PROGRAM EXPENDITURE IS CLOSELY MONITORED INTERNALLY BY DIFFERENT SPECIALLY APPOINTED GROUPS (TASK FORCES, AD HOC GROUPS OR COMMITTEES) AND DULY REPORTED TO OUR BOARD ON A QUARTERLY BASIS.



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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 ROBBINS KERSTEN DIRECT LTD	MAILING		X	20,353,882.	7,208,627.	13,145,256.
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b> .....				20,353,882.	7,208,627.	13,145,256.

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN,  
IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH,  
OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY,

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1		(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		ABS	GOLF	OUTING	(event type)	
Revenue	<b>1</b> Gross receipts . . . . .			92,505.		92,505.
	<b>2</b> Less: Contributions . . . . .			52,627.		52,627.
	<b>3</b> Gross income (line 1 minus line 2). . . . .			39,878.		39,878.
Direct Expenses	<b>4</b> Cash prizes . . . . .					
	<b>5</b> Noncash prizes . . . . .					
	<b>6</b> Rent/facility costs . . . . .			28,975.		28,975.
	<b>7</b> Food and beverages . . . . .					
	<b>8</b> Entertainment . . . . .					
	<b>9</b> Other direct expenses . . . . .			10,903.		10,903.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶					39,878.
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶						

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo		(b) Pull tabs/instant bingo/progressive bingo		(c) Other gaming		(d) Total gaming (add col. (a) through col. (c))
		Yes	No	Yes	No	Yes	No	
Revenue	<b>1</b> Gross revenue . . . . .							
Direct Expenses	<b>2</b> Cash prizes . . . . .							
	<b>3</b> Noncash prizes . . . . .							
	<b>4</b> Rent/facility costs . . . . .							
	<b>5</b> Other direct expenses . . . . .							
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶							
	<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶							

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No

**b** If "No," explain: \_\_\_\_\_

\_\_\_\_\_

**10 a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No

**b** If "Yes," explain: \_\_\_\_\_

\_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	<b>13a</b>	%
b An outside facility	<b>13b</b>	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV** **Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

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**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

**Part I General Information on Grants and Assistance**

- 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
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> DEPARTMENT OF VETERANS AFFAIRS, MARYLAND 10 N. GREEN STREET BALTIMORE, MD 21201-1524	74-1612229			7,256.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(2)</b> V.A. MEDICAL CTR 1970 ROANOKE BLVD SALEM, VA 24153-6478	54-1691022			5,477.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(3)</b> MCGUIRE VA MEDICAL CTR 1201 BROAD ROCK BLVD RICHMOND, VA 23249	54-0515611			13,540.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(4)</b> OVERTON BROOKS V.A. MEDICAL CTR 510 E. STONER ROAD	72-0423660			20,391.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(5)</b> OKLAHOMA CITY VA MEDICAL CTR 921 N.E 13TH STREET	73-1097102			5,320.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(6)</b> OPERATION COMPASSION 1120 URBANE ROAD CLEVELAND, TN 37312-4742	62-1697490			103,892.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(7)</b> MARINE CORPS RELIGIOUS MINISTRIES BLDG 854 BLVD DEFRANCE	53-9990000			14,767.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(8)</b> SACVET 1179 HENRY AVE UNIT 5051	16-1768322			6,287.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(9)</b> US NAVY RECRUITING TRAINING COMMAND 3355 ILLINOIS STREET	34-9990000			16,546.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(10)</b> US ARMY 1-13THE IN. REGIMENT BLDG 11000 FORT JACKSON, SC 29207	35-9990000			8,340.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(11)</b> US ARMY INSTALLATION CHAPLAINS OFFICE 4475 GREGG STREET COLUMBIA, SC 29702-5308	35-9990000			5,574.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(12)</b> US ARMY 165THE INF. REGIMENT BLDG 4250 CHAPLAIN FORT JACKSON, SC 29207	35-9990000			25,550.	COST	BIBLES	BIBLE ENGAGEMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2014)

JSA

4E1288 1.000

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
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OMB No. 1545-0047

**2014**

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Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

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Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

**Part I General Information on Grants and Assistance**

- 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
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AUDI L. MURPHY VA HOSPITAL 7400 MERTON MINTER STREET	74-1612229			7,398.	COST	BIBLES	BIBLE ENGAGEMENT
(2) US AIR FORCE BASIC MILITARY TRAINING 322ND S JBAS 502 ABW/HC OL-A LACKLAND AFB, TX 78236	84-9990000			11,175.	COST	BIBLES	BIBLE ENGAGEMENT
(3) US ARMY 194TH ARMoured BRIGADE 5463 187TH REGIMENT STREET INFANTRY BLDG 3	35-9990000			13,890.	COST	BIBLES	BIBLE ENGAGEMENT
(4) US ARMY RESERVE COMMAND 25 3017 LIPPIZAN STREET	35-9990000			11,934.	COST	BIBLES	BIBLE ENGAGEMENT
(5) CLOSER TO GOD EVANGELICAL PRESBYTERIAN CHUR 369 WALNUT STREET NEWARK, NJ 07105	45-3604355			7,660.	COST	BIBLES	BIBLE ENGAGEMENT
(6) VETERANS INFORMATION CENTER 1507 N. DIXIE HWY	61-1297251			6,368.	COST	BIBLES	BIBLE ENGAGEMENT
(7) LUIS PALAU ASSOCIATION 1865 BROADWAY NEW YORK, NY 10023-7503	13-3143817			92,328.	COST	BIBLES	BIBLE ENGAGEMENT
(8) EVANGELIST MOVEMENT GLORY BE TO GOD 2284 AMSTERDAM AVE.	90-0792728			5,541.	COST	BIBLES	BIBLE ENGAGEMENT
(9) ABUNDANT GRACE FELLOWSHIP CHURCH 11480 NEBO ROAD NEBO, KY 42441-9748	83-0502882			6,007.	COST	BIBLES	BIBLE ENGAGEMENT
(10) NUEVA ESPERANZA INC. 4261 N. 5TH ST. PHILADELPHIA, PA 19140-2615	23-2552707		10,000.		CASH	CASH	BIBLE ENGAGEMENT
(11) STEPHEN JO 725 E9TH STREET APT 5D	13-3143817			14,485.	COST	BIBLES	BIBLE ENGAGEMENT
(12) DEPTMENT OF VETERAN AFFAIRS 2002 HOLCOMBE BLVD HOUSTON, TX 77030-4211	76-0418077			11,440.	COST	BIBLES	BIBLE ENGAGEMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

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Schedule I (Form 990) (2014)

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**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
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Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

**Part I General Information on Grants and Assistance**

- 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
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) VA MEDICAL CTR 100 EMANCIPATION DRIVE	54-1172096			7,112.	COST	BIBLES	BIBLE ENGAGEMENT
(2) VA MEDICAL CTR 1481 W 10TH STREET RM C-2090	35-1906280			5,737.	COST	BIBLES	BIBLE ENGAGEMENT
(3) VA MEDICAL CTR 5901 E 7TH STREET LONG BEACH, CA 90822-5201	95-1652897			5,028.	COST	BIBLES	BIBLE ENGAGEMENT
(4) VA MEDICAL CENTER OF WEST L.A. 11301 WILSHIRE BLVD	08-0503410			5,251.	COST	BIBLES	BIBLE ENGAGEMENT
(5) VA MEDICAL CENTER 1900 EAST MAIN STREET	37-0662493			8,041.	COST	BIBLES	BIBLE ENGAGEMENT
(6) DVA MEDICAL CENTER 2400 HOSPITAL ROAD TUSKEGEE, AL 36053-5001	63-0803166			8,463.	COST	BIBLES	BIBLE ENGAGEMENT
(7) VA MEDICAL CTR/LEWIS A. JOHNSON 1 MEDICAL CENTER DRIVE CLARKSBURG, WV 26301	74-1612229			8,107.	COST	BIBLES	BIBLE ENGAGEMENT
(8) VA MEDICAL CTR 1 JEFFERSON BARRACKS ROAD	43-0684806			5,190.	COST	BIBLES	BIBLE ENGAGEMENT
(9) VA MEDICAL CTR 1540 SPRING VALLEY ROAD	55-0357745			17,056.	COST	BIBLES	BIBLE ENGAGEMENT
(10) AMERICAN REHABILITATION MINISTRIES 3605 N. MAIN STREET JOPLIN, MO 64801-7665	43-1037106			25,020.	COST	BIBLES	BIBLE ENGAGEMENT
(11) US NAVY USS HARRY S. TRUMAN (CVN 75) CRMD BOX7 FPO, AE 09524-0007	34-9990000			6,705.	COST	BIBLES	BIBLE ENGAGEMENT
(12) CAMPUS CRUSADE FOR CHRIST 750 MID GROUND BLVD NEWPORT NEWS, VA 23606	95-6006123			34,840.	COST	BIBLES	BIBLE ENGAGEMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

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Schedule I (Form 990) (2014)

JSA

4E1288 1.000

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
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OMB No. 1545-0047

**2014**

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Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

**Part I General Information on Grants and Assistance**

- 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
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> AMERICAN REHABILITATION MINISTRIES 3605 N MAIN STREET JOPLIN, MO 64801-7665	43-1037106		85,728.		CASH	CASH	BIBLE ENGAGEMENT
<b>(2)</b> VETERANS AFFAIRS MEDICAL CTR 2495 SHREVEPORT HIGHWAY #71	72-0411414			6,057.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(3)</b> MOBIA 1865 BROADWAY NEW YORK, NY 10023	20-1915394		525,000.		CASH	CASH	BIBLE ENGAGEMENT
<b>(4)</b> OPERATION COMPASSION 114 STEWART ROAD N.E. CLEVELAND, TN 37312	62-1697490		107,500.		CASH	CASH	BIBLE ENGAGEMENT
<b>(5)</b> NEW YORK CITY LEADERSHIP CENTER, INC 4604 31ST AVE 2ND FLOOR	20-8991671		220,659.		CASH	CASH	BIBLE ENGAGEMENT
<b>(6)</b> COMPASS: FINANCES GOD'S WAY 100 CROWN OAK CENTER DRIVE	27-1252917		25,000.		CASH	CASH	BIBLE ENGAGEMENT
<b>(7)</b> WILLOW CREEK ASSOCIATION 67 ALGONQUIN RD S BARRINGTON, IL 60010-6143	36-3799040		250,000.		CASH	CASH	BIBLE ENGAGEMENT
<b>(8)</b> HINES VA HOSPITAL 5000 S. FIFTH AVE. HINES, IL 60141-3030	70-8202531			8,207.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(9)</b> LIFE CHURCH 8443 WOODREED DRIVE	32-2014110			5,139.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(10)</b> US NAVAL ACADEMY 101 COOPER ROAD ANNAPOLIS, MD 21402-1374	34-9990000			7,040.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(11)</b> JESSE BROWN VA IN CHICAGO 820 S. DAMEN AVE. CHICAGO, IL 60612-3728	99-7393106			7,157.	COST	BIBLES	BIBLE ENGAGEMENT
<b>(12)</b> VA NEW JERSEY HEALTHCARE SYSTEM 151 KNOLLCRAFT ROAD LYONS, NJ 07939-5001	22-1526640			6,410.	COST	BIBLES	BIBLE ENGAGEMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 48.

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2014)

JSA

4E1288 1.000

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART I, LINE 2

AMERICAN BIBLE SOCIETY HAS FORMED A DEPARTMENT AS DISCUSSED IN SCHEDULE F, PART V, TO EVALUATE AND ASSESS THE WORTHINESS AND EFFECTIVENESS OF REQUESTED PROJECT GRANT AMOUNTS, BOTH BEFORE THE GRANT IS ISSUED, AND AFTER THE GRANT AND PROJECT HAVE BEEN COMPLETED. DETAILED REPORTS (IMPACT STATEMENTS) ARE PREPARED USING A STANDARD METHODOLOGY OF FINANCIAL AND LIFE IMPACT MEASUREMENT FOR MANAGEMENT DECISION IN GRANT APPROVAL AND POST PROJECT EVALUATION OF EFFECTIVENESS AND GRANT COMPLIANCE.



**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART II

THE SOCIETY PROVIDED MAJOR FINANCIAL SUPPORT AND IN-KIND SERVICES TO MOBIA DURING FISCAL 2015. THE SUPPORT AMOUNTED TO \$1,125,000 OF THE AMOUNT \$525,000 CONSISTED OF CASH CONTRIBUTIONS AND THE REMAINDER CONSISTED OF IN-KIND SERVICES.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

AMERICAN BIBLE SOCIETY

**Compensation Information**

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

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

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Employer identification number

13-1623885

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

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

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? . . . . .

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? . . . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . .

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

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

	Yes	No
<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
<b>9</b>		

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

Schedule J (Form 990) 2014

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ROY L PETERSON PRESIDENT & CEO	(i)	337,916.	0	3,153.	23,000.	24,968.	389,037.	0
	(ii)	0	0	0	0	0	0	0
2 ROBERT BRIGGS SVP	(i)	211,499.	0	2,792.	17,600.	38,494.	270,385.	0
	(ii)	0	0	0	0	0	0	0
3 DONALD CAVANAUGH CORP SEC/CAE (THROUGH 9/30/15)	(i)	160,546.	0	803.	21,332.	39,412.	222,093.	0
	(ii)	0	0	0	0	0	0	0
4 MARK DILLON SVP (THROUGH 6/30/15)	(i)	342,605.	0	2,590.	26,769.	25,947.	397,911.	0
	(ii)	0	0	0	0	0	0	0
5 STEPHEN D. KING SVP, COO (THROUGH 12/23/15)	(i)	219,224.	0	3,144.	18,154.	36,069.	276,591.	0
	(ii)	0	0	0	0	0	0	0
6 GEOFFREY MORIN SVP	(i)	213,643.	0	666.	16,800.	35,676.	266,785.	0
	(ii)	0	0	0	0	0	0	0
7 JULIA A. OLIVER SVP, CFO	(i)	208,374.	0	1,159.	17,600.	40,664.	267,797.	0
	(ii)	0	0	0	0	0	0	0
8 MARK FORSHAW DIRECTOR	(i)	161,675.	0	519.	13,506.	36,122.	211,822.	0
	(ii)	0	0	0	0	0	0	0
9 NIKOLAOS GARBIDAKIS DIRECTOR	(i)	179,376.	0	1,691.	15,537.	44,419.	241,023.	0
	(ii)	0	0	0	0	0	0	0
10 JANET GRELL DIRECTOR	(i)	166,836.	0	1,522.	13,793.	16,916.	199,067.	0
	(ii)	0	0	0	0	0	0	0
11 MARCO HERRERA DIRECTOR	(i)	157,337.	0	3,318.	12,980.	25,518.	199,153.	0
	(ii)	0	0	0	0	0	0	0
12 LEE MANIS DIRECTOR	(i)	166,356.	0	2,342.	14,071.	39,040.	221,809.	0
	(ii)	0	0	0	0	0	0	0
13 NICHOLAS PAGANO DIRECTOR	(i)	163,008.	0	831.	21,914.	41,065.	226,818.	0
	(ii)	0	0	0	0	0	0	0
14 MARIO PAREDES DIRECTOR	(i)	179,574.	0	2,487.	14,566.	14,091.	210,718.	0
	(ii)	0	0	0	0	0	0	0
15 JAMES PUCHY CHIEF OF STAFF	(i)	178,977.	0	1,548.	14,008.	26,783.	221,316.	0
	(ii)	0	0	0	0	0	0	0
16 PETER RATHBUN GENERAL COUNSEL	(i)	185,130.	0	3,026.	15,298.	26,405.	229,859.	0
	(ii)	0	0	0	0	0	0	0

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 STEPHEN SHARP DIRECTOR	(i)	159,790.	0	3,579.	13,375.	27,622.	204,366.	0
	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**Part III Supplemental Information**

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

SCHEDULE J, PART I

FORM 990, SCHEDULE J, LINE 1A

AMERICAN BIBLE SOCIETY'S ("BIBLE SOCIETY") TRAVEL POLICY PROVIDES FOR SPOUSAL TRAVEL IN LIMITED CIRCUMSTANCES WHERE THERE IS A PRE-APPROVED, DEFINED/MEASUREABLE BIBLE SOCIETY BUSINESS PURPOSE.

THE BIBLE SOCIETY DOES PROVIDE A CLERGY HOUSING ALLOWANCE TO SEVERAL OFFICERS AND DIRECTORS REPORTED ON PART VII AND SCHEDULE J OF THE FORM 990. THE CLERGY ALLOWANCE IS PROVIDED TO ORDAINED STAFF MEMBERS AND IS REPORTED IN SCHEDULE J, PART II, COLUMN (B)(I).

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

**Transactions With Interested Persons**

OMB No. 1545-0047

**2014**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**  
▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**Open To Public Inspection**

Name of the organization  
**AMERICAN BIBLE SOCIETY**

Employer identification number  
**13-1623885**

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).  
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**  
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
				(1)									
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
<b>Total</b> . . . . . ▶							\$						

**Part III Grants or Assistance Benefiting Interested Persons.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DAVID TROBISCH	TRUSTEE	15,757.	BIBLICAL SOURCE TEXT RESEARCH		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part V Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART IV, LINE 1

CONSISTENT WITH OUR MISSION, AMERICAN BIBLE SOCIETY ENTERED INTO A TRANSACTION WITH DR. DAVID TROBISCH, A MEMBER OF THE BOARD OF TRUSTEES, FOR A FEASIBILITY STUDY TO SUPPORT A VISUAL DATABASE OF NEW TESTAMENT GREEK MANUSCRIPTS. DR. TROBISCH IS ONE OF ONLY A HANDFUL OF SCHOLARS QUALIFIED TO CONDUCT THIS RESEARCH. THE FEASIBILITY STUDY SCOPE AND COSTS WERE VETTED BY THE BOARD COMMITTEE ON TRANSLATION AND SCHOLARSHIP. COMPENSATION WAS DETERMINED TO BE REASONABLE, AS IT WAS BELOW MARKET FOR THE LEVEL OF WORK AND SCHOLARSHIP. FULL DISCLOSURE WAS MADE TO THE BOARD, THE GOVERNING BODY, PRIOR TO THE TRANSACTION BEING APPROVED. THE BOARD APPROVED THE TRANSACTION WHILE DR. TROBISCH WAS RECUSED.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2014**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art . . . . .				
2 Art - Historical treasures . . . . .				
3 Art - Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities - Publicly traded . . . . .	X	12.	281,405.	MARKET VALUE
10 Securities - Closely held stock . . . . .				
11 Securities - Partnership, LLC, or trust interests . . . . .				
12 Securities - Miscellaneous . . . . .				
13 Qualified conservation contribution - Historic structures . . . . .				
14 Qualified conservation contribution - Other . . . . .				
15 Real estate - Residential . . . . .				
16 Real estate - Commercial . . . . .				
17 Real estate - Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( _____ )				
26 Other ▶ ( _____ )				
27 Other ▶ ( _____ )				
28 Other ▶ ( _____ )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29** 1.

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .	X	
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2014)

JSA

4E1298 1.000



**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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SCHEDULE M, PART I, LINE 32

ALL CONTRIBUTED SECURITIES ARE TRANSFERRED INTO A BROKERAGE ACCOUNT FOR  
TIMELY AND EXPEDITIOUS SALE BY AMERICAN BIBLE SOCIETY'S INVESTMENT  
BROKERS.

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

Department of the Treasury  
Internal Revenue Service

Name of the organization

AMERICAN BIBLE SOCIETY

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

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

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Employer identification number

13-1623885

FORM 990, PART VI, SECTION B

POLICIES LINE 11: THE FORM 990 WAS PREPARED AND REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM, GRANT THORNTON LLP, IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. A COPY OF THE DRAFT FORM 990 WAS CIRCULATED TO THE FULL BOARD OF TRUSTEES FOR DISCUSSION AND COMMENT. EACH BOARD MEMBER WAS PROVIDED AMPLE OPPORTUNITY TO COMMENT ON THE INFORMATION CONTAINED IN THE 990 PRIOR TO ITS FILING WITH THE INTERNAL REVENUE SERVICE.

LINE 12: EMPLOYEES ARE REGULARLY COUNSELED BY THE LEGAL STAFF IN CONFLICT OF INTEREST AWARENESS AND ARE REQUIRED TO FILE CONFLICT OF INTEREST DISCLOSURE STATEMENTS ANNUALLY. CONFLICTS IDENTIFIED ARE INVESTIGATED BY THE INTERNAL AUDIT STAFF FOR RESOLUTION WITH MANAGEMENT AND THE BOARD AUDIT COMMITTEE.

LINE 15: COMPENSATION FOR THE PRESIDENT & CEO IS DETERMINED BY A COMPENSATION COMMITTEE APPOINTED BY THE BOARD OF TRUSTEES. THE COMPENSATION COMMITTEE RELIES ON A NUMBER OF DIFFERENT SOURCES TO DETERMINE COMPENSATION, INCLUDING, BUT NOT LIMITED TO, COMPENSATION BENCHMARK SURVEYS AND STUDIES, COMPENSATION PAID TO SIMILAR OFFICERS AT SIMILAR INSTITUTIONS (I.E. BY REVIEWING THE FORM 990 OF OTHER ORGANIZATIONS), INCLUDING THOSE IN MAJOR URBAN CENTERS. RECOMMENDATIONS WERE BASED ON A COMPREHENSIVE STUDY LEVERAGING EXTERNAL, INDEPENDENT RESEARCH BY GUIDE STAR AND OTHER 3RD PARTY CONSULTING ORGANIZATIONS. THE

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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OFFICERS OF THE BOARD RECOMMEND THE CEO COMPENSATION TO THE FULL BOARD OF TRUSTEES FOR ITS APPROVAL. THE BOARD OF TRUSTEES' APPROVAL IS DOCUMENTED IN MINUTES. COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION IS DETERMINED USING VARIOUS SOURCES BY HUMAN RESOURCES SUCH AS COMPENSATION SURVEYS AND STUDIES, INCLUDING INFORMATION ON FORM 990 OF OTHER ORGANIZATIONS AS WELL AS INDEPENDENT COMPENSATION STUDIES. HUMAN RESOURCES THEN OBTAINS APPROVAL FOR THE RECOMMENDED COMPENSATION FROM THE OFFICERS' OR KEY EMPLOYEES' NEXT HIGHER LEVEL MANAGER. FINAL COMPENSATION AMOUNT IS THEN COMMUNICATED TO THE OFFICER OR KEY EMPLOYEE BY HUMAN RESOURCES.

## SECTION C: DISCLOSURE

LINE 19: AMERICAN BIBLE SOCIETY ("THE BIBLE SOCIETY") MAKES ITS FORM 990 AND AUDITED FINANCIAL STATEMENTS AVAILABLE ON ITS WEBSITE, WWW.AMERICANBIBLE.ORG. THE BIBLE SOCIETY'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST STATEMENT ARE AVAILABLE UPON REQUEST AND AT MANAGEMENT'S DISCRETION.

FORM 990, PART VI, LINE 1A & 1B AND PART VII  
THE BIBLE SOCIETY IS REPORTING 18 VOTING MEMBERS OF THE BOARD OF TRUSTEES. SINCE ONE VOTING MEMBER OF THE BOARD WAS COMPENSATED, THE BIBLE SOCIETY IS REPORTING 17 INDEPENDENT VOTING MEMBERS OF THE BOARD OF TRUSTEES AT THE END OF THE TAX YEAR.

FORM 990, PART VIII, LINE 11A SALE OF BUILDING  
PROCEEDS FROM SALE OF BUILDING \$300,000,000

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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LESS: COST BASIS AND SELLING EXPENSES                    25,329,511  
-----  
GAIN FROM SALE    274,670,489

WHILE REMAINING INCORPORATED IN THE STATE OF NEW YORK, THE SOCIETY  
RELOCATED TO PHILADELPHIA IN AUGUST 2015 AFTER THE SALE OF ITS NEW YORK  
CITY HEADQUARTERS BUILDING IN JANUARY 2015.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS \$(6,723,482)

PENSION RELATED ACTIVITY                                    2,640,740  
-----

TOTAL    (4,082,742)  
=====

ATTACHMENT 1

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

SINCE 1816, AMERICAN BIBLE SOCIETY HAS BEEN FULFILLING ITS MISSION OF  
MAKING THE BIBLE AVAILABLE TO EVERY PERSON IN A LANGUAGE AND FORMAT  
EACH CAN UNDERSTAND AND AFFORD SO ALL PEOPLE MAY EXPERIENCE ITS  
LIFE-CHANGING MESSAGE.

FROM SENDING BIBLES OUT TO THE FRONTIER WITH PONY EXPRESS RIDERS,  
SENDING POCKET-SIZED BIBLES TO SOLDIERS ON BATTLEFIELDS, GOING BEHIND  
BARS WITH PRISON CHAPLAINS, TO SPEAKING THROUGH ONE OF THE  
MOST-VISITED PAGES ON FACEBOOK, THE DISTRIBUTION OF HOPE BY AMERICAN  
BIBLE SOCIETY HAS TAKEN ON A MYRIAD OF FORMS. WHETHER BY BOAT, PLANE,

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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ATTACHMENT 1 (CONT'D)

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

TRAIN, SMART PHONE OR AUDIO, AMERICAN BIBLE SOCIETY HAS USED WHATEVER AVENUE IS AVAILABLE TO GET GOD'S WORD AROUND THE WORLD WHERE NEEDED MOST.

TODAY'S AMERICAN BIBLE SOCIETY CONTINUES TO INVITE MILLIONS ACROSS THE GLOBE TO EXPERIENCE THE LIFE-CHANGING MESSAGE OF THE BIBLE, FOCUSING ON WAYS TO: - ENGAGE - TODAY'S GENERATIONS SET ADRIFT; - RESTORE - LIVES FACING THE WORLD'S TOUGHEST TRAUMAS; AND - PROVIDE - GOD'S WORD FOR THOSE STILL WAITING. AMERICAN BIBLE SOCIETY CARRIES OUT ITS MISSION BY: AFFIRMING THE POWER OF GOD TO SPEAK TO EVERY GENERATION THROUGH THE HOLY SCRIPTURES; PROVIDING TRANSLATIONS OF THE HOLY SCRIPTURES THAT ARE FAITHFUL TO THE ORIGINAL BIBLICAL TEXTS; WORKING IN PARTNERSHIP WITH ALL CHRISTIAN CHURCHES AND CHRISTIAN COMMUNITIES; AND, USING THE BEST OF TODAY'S TECHNOLOGY AND TOOLS TO ALLOW THE WORD OF GOD TO COME ALIVE FOR BOTH CULTURE-FACING BIBLE ADVOCACY AND CHURCH EQUIPPING BIBLE ENGAGEMENT.

IN FISCAL YEAR 2015, AMERICAN BIBLE SOCIETY REPOSITIONED ITSELF FOR ITS NEXT SEASON OF MINISTRY, SEEKING TO SEE 100 MILLION PEOPLE LIVING IN THE UNITED STATES ACTIVELY ENGAGED IN GOD'S WORD OVER THE NEXT 10 YEARS. IN ADDITION, ON A GLOBAL FRONT, WE WANT TO FINISH THE BIBLE TRANSLATION WORK THAT WE ALWAYS HAVE BEEN IMMERSSED IN AND SEE 100% OF THE WORLD'S LANGUAGES, TRANSLATED INTO SCRIPTURE TO OPEN UP FIRST ENGAGEMENT OPPORTUNITIES FOR THOSE WHO YET TO EXPERIENCE THE BIBLE'S LIFE-CHANGING MESSAGE. BASED ON THESE VISION TARGETS, AMERICAN BIBLE SOCIETY HAD THE PRIVILEGE OF SEEING OVER 15 MILLION PEOPLE ACTIVELY

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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ATTACHMENT 1 (CONT'D)

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

ENGAGED WITH GOD'S WORD IN FISCAL YEAR 2015 ALONE.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

IN THE LAST YEAR, AMERICAN BIBLE SOCIETY HAS CONTINUED TO PURSUE ITS MISSION OF MAKING THE BIBLE AVAILABLE TO EVERY PERSON IN A LANGUAGE AND FORMAT EACH CAN UNDERSTAND AND AFFORD SO ALL PEOPLE MAY EXPERIENCE ITS LIFE-CHANGING MESSAGE. BACKED BY THE PRAYERS AND SUPPORT OF FINANCIAL PARTNERS, AMERICAN BIBLE SOCIETY HAS WORKED TO ACCOMPLISH THIS GOAL IN THE UNITED STATES AND AROUND THE GLOBE THROUGH BIBLE TRANSLATION, BIBLE DISTRIBUTION, BIBLE ADVOCACY, EQUIPPING LEADERS TO PROMOTE BIBLE ENGAGEMENT AND BIBLE-BASED TRAUMA HEALING.

IN THE U.S., AMERICAN BIBLE SOCIETY WORKED WITH CHURCH AND MINISTRY LEADERS IN CITIES TO MOBILIZE LOCAL BIBLE ENGAGEMENT MOVEMENTS. IN PHOENIX, THIS INCLUDED LAUNCHING A MINISTRY NETWORK AND COLLABORATING WITH THE JOHN 17 MOVEMENT, AN INTERCONFESSIOAL CHRISTIAN NETWORK IN PHOENIX. IN NEW YORK CITY, AMERICAN BIBLE SOCIETY HOSTED A LISTENING CAMPAIGN WITH PASTORS ON THE TOPIC OF SCRIPTURE ENGAGEMENT AND WORKED TO SUPPORT THE LUIS PALAU ASSOCIATION IN PLANNING AND SUPPORTING 115 OUTREACH EVENTS IN NEW YORK CITY IN THE SUMMER OF 2015. AT THE OCTOBER 2014 EVENT "MOVEMENT DAY," A GATHERING OF 1,500 CHRISTIAN LEADERS FROM 250 CITIES, 33 STATES AND 8 COUNTRIES, AMERICAN BIBLE SOCIETY

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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ATTACHMENT 2 (CONT'D)

PRESIDENT AND STAFF PRESENTED THE VISION OF A BIBLE-ENGAGED CITY AND LAUNCHED THE CITY-FOCUSED SCRIPTURE SUITE "NOW IS THE TIME: LUKE." IN ADDITION, BIBLE ENGAGEMENT SEMINARS FOR LATINO COMMUNITIES IN NEW YORK CITY AND HOUSTON REACHED MORE THAN 450 LEADERS. THE YOUTH AND MILLENNIALS TEAM LAUNCHED A NEW PARTNERSHIP WITH YOUNG LIFE TO MAKE THE BIBLE ACCESSIBLE TO AT-RISK STUDENTS IN THE YOUNG LIFE PROGRAM. THROUGH A PARTNERSHIP WITH THE WILLOW CREEK ASSOCIATION, AMERICAN BIBLE SOCIETY WAS ABLE TO CAST VISION FOR THE FUTURE OF BIBLE ENGAGEMENT TO MORE THAN 400 LEADERS AT A WILLOW CREEK EVENT IN FLORIDA AND CONTRIBUTE TARGETED SCRIPTURE ENGAGEMENT RESOURCES TO THOUSANDS OF LEADERS WHO SUBSCRIBE TO WILLOW CREEK'S MONTHLY EMAIL UPDATE. ROMAN CATHOLIC MINISTRIES TEAM HOSTED A CATHOLIC BIBLE SUMMIT IN PARTNERSHIP WITH THE ARCHDIOCESE OF NEW YORK IN NEW YORK CITY WITH 200 KEY LEADERS FROM THE ROMAN CATHOLIC CHURCH AND CONTINUED ITS LECTIO DIVINA PROGRAM TO PROMOTE SCRIPTURE ENGAGEMENT THROUGHOUT LOCAL PARISHES AND DIOCESE. ARMED SERVICES MINISTRIES PROVIDED MORE THAN 440,000 SCRIPTURE RESOURCES TO THE MILITARY, MILITARY VETERANS AND THEIR FAMILIES IN ORDER TO CULTIVATE SCRIPTURE ENGAGEMENT. IN ADDITION, THE GOD UNDERSTANDS PROJECT, WHICH PROVIDES GOD'S WORD TO VETERANS STRUGGLING WITH TRAUMA REACHED MORE THAN 50,000 PEOPLE, AND THE NEW MILITARY BIBLE CHALLENGE WEB APP MADE IT POSSIBLE FOR MILITARY FAMILIES TO INTERACT WITH THE BIBLE FROM A DISTANCE.

AROUND THE WORLD, AMERICAN BIBLE SOCIETY HAS WORKED TO SERVE THE

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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## ATTACHMENT 2 (CONT'D)

GLOBAL CHURCH THROUGH INVESTING IN ACCELERATED BIBLE TRANSLATION AND FRONTLINE SCRIPTURE ENGAGEMENT. ACCELERATED BIBLE TRANSLATION SEEKS TO PROVIDE SCRIPTURE IN PEOPLE'S HEART LANGUAGES BY INTRODUCING THE COMMON FRAMEWORK OF SCRIPTURE TRANSLATION (ACCELERATED IMPACT, OWNERSHIP, AND STEWARDSHIP) AND ENSURING THAT 100 PERCENT OF LANGUAGES HAVE SOME PORTION OF SCRIPTURE BY 2025. AMERICAN BIBLE SOCIETY SUPPORTED A TOTAL OF 279 BIBLE TRANSLATION PROJECTS IN 61 COUNTRIES, IMPACTING MORE THAN 6.5 MILLION PEOPLE. AMERICAN BIBLE SOCIETY'S NIDA INSTITUTE FOR BIBLICAL SCHOLARSHIP SUPPORTS THIS WORK BY GUIDING RESEARCH AND IMPLEMENTATION OF TRANSLATION BEST PRACTICES AROUND THE GLOBE. EVERY TRIBE EVERY NATION, AN ALLIANCE OF BIBLE TRANSLATION ORGANIZATIONS, WAS A CRITICAL PARTNER IN SEEING ACCELERATED BIBLE TRANSLATION. COLLABORATION THROUGH EVERY TRIBE EVERY NATION DECREASED DUPLICATION OF WORK AND INCREASED THE QUALITY AND EFFICIENCY OF BIBLE TRANSLATION. EVERY TRIBE EVERY NATION HELPED TO PROVIDE AND ADVOCATE FOR TRANSLATOR TRAINING, TECHNOLOGICAL ADVANCEMENTS IN THE BIBLE TRANSLATION PROCESS, AND THE ACCELERATION OF INDIVIDUAL BIBLE TRANSLATIONS. ONE EXAMPLE OF ACCELERATED BIBLE TRANSLATION IS THE NSENGA TRANSLATION. THE NSENGA (INTER-CONFESSIONAL) BIBLE TRANSLATION PROJECT BEGAN IN 2010 AS A GRASSROOTS MOVEMENT OF THE NSENGA-SPEAKING PEOPLE IN ZAMBIA. THE TRANSLATION PROCESS COULD HAVE LASTED 8 YEARS, BUT THANKS TO FUNDING PROVIDED BY AMERICAN BIBLE SOCIETY AND EVERY TRIBE EVERY NATION, WHICH PROVIDED A GENERATOR FOR ELECTRICAL POWER, COMPUTERS AND BICYCLES FOR



Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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## ATTACHMENT 2 (CONT'D)

TRANSPORTATION, THE TRANSLATORS WERE ABLE TO COMPLETE A TRANSLATION OF THE NEW TESTAMENT IN JUST UNDER 4 YEARS. THE DEDICATION CEREMONY FOR THE NSENGA NEW TESTAMENT IS TENTATIVELY SCHEDULED FOR JUNE 2016. THE INTENTION IS TO CONTINUE TRANSLATING THE FULL BIBLE.

FRONTLINE SCRIPTURE ENGAGEMENT ADVANCES FIRST-TIME SCRIPTURE ENGAGEMENT IN THE WORLD'S MOST HOSTILE AND REMOTE REGIONS BY FOCUSING ON THREE CRITICAL AREAS: NEW BELIEVERS (EMPHASIS ON MIDDLE EAST, CENTRAL ASIA, CHINA AND INDIA), MILLENNIALS/YOUTH (IN AFRICA AND LATIN AMERICA, WHERE 45 PERCENT OF THE POPULATION IS UNDER 25), AND PEOPLE UNDER OPPRESSION (PEOPLE WHO ARE PERSECUTED, DISPLACED, TRAUMATIZED, ORPHANS, WIDOWS, OR IN EXTREME POVERTY). TWO KEY INITIATIVES FOR FRONTLINE SCRIPTURE ENGAGEMENT ARE END-TO-END AND THE DOMESTIC VIOLENCE CLUSTER IN LATIN AMERICA: "READ TO LIVE." THE END-TO-END IS A SIMPLE THREE-PHASE PROGRAM INCLUDING: SHOWING "THE JESUS FILM" BY CRU (CAMPUS CRUSADE FOR CHRIST INTERNATIONAL), ORGANIZING BELIEVERS INTO FAITH COMES BY HEARING LISTENING GROUPS, AND PROVIDING BIBLES FOR DAILY SCRIPTURE ENGAGEMENT. AMERICAN BIBLE SOCIETY CHAMPIONED THE SCRIPTURE ENGAGEMENT ELEMENT OF END-TO-END IN 13 COUNTRIES, INCLUDING INDIA AND 12 COUNTRIES IN AFRICA, AND REACHED 318,112 PEOPLE. FIVE BIBLE SOCIETIES IN LATIN AMERICA HAVE WORKED TOGETHER SINCE 2011 TO ADDRESS ILLITERACY AND DOMESTIC VIOLENCE THROUGH THE READ TO LIVE INITIATIVE. USING RESOURCES IN SPANISH AND INDIGENOUS LANGUAGES,

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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## ATTACHMENT 2 (CONT'D)

THE PROGRAM HAS SERVED AS A CATALYST TO DECREASE VIOLENCE AGAINST WOMEN AND CHILDREN AND STRENGTHEN FAMILIES. THE INITIATIVE REACHED MORE THAN 96,000 PEOPLE.

AMERICAN BIBLE SOCIETY'S TRAUMA HEALING WORK EQUIPPED LOCAL LEADERS WITH BIBLICAL AND MENTAL HEALTH RESOURCES TO ENABLE TRAUMATIZED PEOPLE TO EXPERIENCE THE LIFE-CHANGING MESSAGE OF THE BIBLE. IN THE LAST YEAR, 40,000 PARTICIPANTS PARTICIPATED IN THE PROGRAM'S EQUIPPING SESSIONS, HEALING SESSIONS, MINI SESSIONS AND COMMUNITIES OF PRACTICE; 1,738 NEW FACILITATORS RECEIVED TRAINING, AND TRAUMA HEALING SESSIONS WERE HELD IN 29 COUNTRIES, INCLUDING SEVEN NEW COUNTRIES. THE TRAUMA HEALING TEAM ALSO WORKED WITH BIBLE SOCIETIES AROUND THE WORLD TO LAY THE GROUNDWORK FOR DELIVERING THE TRAUMA HEALING PROGRAM THROUGH 30-MINUTE RADIO PROGRAMS WITH ACCOMPANYING SCRIPTURE SONGS. THE CHILDREN'S TRAUMA HEALING PROGRAM WAS PILOTED IN SPANISH, AND THIS CURRICULUM WAS LAUNCHED THROUGH A TRAINING SESSION AT WHEATON COLLEGE AND A CHILDREN'S TRAUMA HEALING SESSION IN NICARAGUA. IN RESPONSE TO THE EBOLA CRISIS, THE TRAUMA HEALING TEAM DEVELOPED AN AUDIO TRAUMA HEALING PROGRAM THAT WAS SPECIFICALLY ADAPTED FOR EBOLA-STRICKEN GUINEA AND LIBERIA. AMERICAN BIBLE SOCIETY WORKED WITH LIFE FOCUS TV TO PRODUCE "HOPE RISING," AN EMMY-NOMINATED DOCUMENTARY ABOUT AMERICAN BIBLE SOCIETY'S BIBLE-BASED TRAUMA WORK. THE DOCUMENTARY WAS AIRED ON ABC WITH A VIEWERSHIP OF 35 MILLION PEOPLE.

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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ATTACHMENT 2 (CONT'D)

THROUGHOUT ITS DOMESTIC AND INTERNATIONAL WORK, AMERICAN BIBLE SOCIETY PRIORITIZES WORKING WITH DEDICATED MINISTRY PARTNERS IN ORDER TO DELIVER EFFICIENT, HIGH-QUALITY RESULTS. WE PLAY A VITAL ROLE IN HELPING OUR PARTNERS DEEPEN AND EXPAND THEIR IMPACT THROUGH SCRIPTURE ENGAGEMENT. A CRITICAL INTERNATIONAL PARTNERSHIP IS THE UNITED BIBLE SOCIETY (UBS) FELLOWSHIP. FORMED IN 1946 FOLLOWING THE END OF WWII, UBS INCLUDES MORE THAN 140 NATIONAL BIBLE SOCIETIES OPERATING IN MORE THAN 200 COUNTRIES AROUND THE WORLD. THIS GLOBAL NETWORK ENSURES THAT GLOBAL SUPPORT IS APPLIED TO THE LOCAL NEEDS FOR GOD'S WORD. DOMESTICALLY A RANGE OF PARTNERS-FROM LOCAL CHURCHES TO NATIONAL ORGANIZATIONS SUCH AS MOVEMENT DAY AND THE WILLOW CREEK ASSOCIATION-HELP TO CHANNEL SCRIPTURE-IMPACT TO THE COMMUNITIES THAT NEED IT MOST. THIS PARTNERSHIP MODEL MINIMIZES DUPLICATION OF EFFORTS AND MAXIMIZES THE IMPACT OF EACH PROJECT FOR THE CHRISTIAN COMMUNITY.

ALL OF THESE ACTIVITIES ARE TAKING PLACE AT AN HISTORIC MOMENT IN AMERICAN BIBLE SOCIETY'S HISTORY. IN MAY OF 2016, AMERICAN BIBLE SOCIETY WILL CELEBRATE 200 YEARS OF SHARING GOD'S WORD IN THE U.S. AND AROUND THE WORLD. AS THE ORGANIZATION CELEBRATES GOD'S FAITHFULNESS IN THE PAST, IT IS ALSO LOOKING TOWARD AN AUDACIOUS NEW GOAL: SEEING 100 MILLION PEOPLE IN THE U.S. ENGAGED WITH GOD'S WORD AND 100 PERCENT OF LANGUAGES WITH ACCESS TO SCRIPTURE IN THE NEXT 10 YEARS.

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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ATTACHMENT 3FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

AUSTRIA

BRAZIL

EGYPT

HONG KONG

HUNGARY

ATTACHMENT 4FORM 990, PART VI, LINE 17 - STATES

AZ, AR, CO,

DC, FL, HI, IL, KY, LA, ME, MD,

MN, MS, NH, NM, NY, OK, OR, PA,

SC, TN, VA, WA, WV, WI,

ATTACHMENT 5990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
ROBBINSKERSTEN DIRECT 3400 WATERVIEW PKWY STE 250 RICHARDSON, TX 75080	DIRECT MAIL	4,320,253.
MASTERWORKS 19462 POWDER HILL PL NE POULSBO, WA 98370	DIRECT MAIL	2,453,777.
RESOURCE ONE PO BOX 839 TULSA, OK 74101	WAREHOUSING/LOGISTIC	1,461,950.
WORD4ASIA PO BOX 18448 ANAHEIM HILLS, CA 92817	BIBLE DISTRIBUTION	1,396,001.
ABM JANITORIAL SERVICES NORTHEAST INC. PO BOX 1534	CUSTODIAL	945,720.

Name of the organization AMERICAN BIBLE SOCIETY	Employer identification number 13-1623885
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ATTACHMENT 5 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
NEW YORK, NY 10008		

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Table with 6 columns: (a) Name, address, and EIN (if applicable) of disregarded entity; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Total income; (e) End-of-year assets; (f) Direct controlling entity. Rows 1-6 are empty.

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

Table with 7 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Exempt Code section; (e) Public charity status (if section 501(c)(3)); (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity? (Yes/No). Rows 1-7 are empty.

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

Schedule R (Form 990) 2014

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) ASTOR PLACE 13-4933900 1865 BROADWAY NEW YORK, NY 10023	INACTIVE	NY	N/A	C CORP	0	0	100.0000	X	
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Table with 3 columns: Question (1a-1s), Yes, No. Rows include: 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? 1a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. 1b Gift, grant, or capital contribution to related organization(s). 1c Gift, grant, or capital contribution from related organization(s). 1d Loans or loan guarantees to or for related organization(s). 1e Loans or loan guarantees by related organization(s). 1f Dividends from related organization(s). 1g Sale of assets to related organization(s). 1h Purchase of assets from related organization(s). 1i Exchange of assets with related organization(s). 1j Lease of facilities, equipment, or other assets to related organization(s). 1k Lease of facilities, equipment, or other assets from related organization(s). 1l Performance of services or membership or fundraising solicitations for related organization(s). 1m Performance of services or membership or fundraising solicitations by related organization(s). 1n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s). 1o Sharing of paid employees with related organization(s). 1p Reimbursement paid to related organization(s) for expenses. 1q Reimbursement paid by related organization(s) for expenses. 1r Other transfer of cash or property to related organization(s). 1s Other transfer of cash or property from related organization(s).

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

Table with 4 columns: (a) Name of related organization, (b) Transaction type (a-s), (c) Amount involved, (d) Method of determining amount involved. Rows (1) through (6) are currently empty.



**Part VI** Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
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**Part VII** **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

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