

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

Department of the Treasury
Internal Revenue ServiceFor calendar year 2019, or fiscal year beginning JUL 1, 2019, and ending JUN 30, 2020**2019**▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

Employer identification number

AMERICAN BIBLE SOCIETY**13-1623885**

Name and title of officer

MARK WILSON**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 one 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>97,105,439.</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, line 3c)	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 2019 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 26234
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2019 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 2019 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 ▶ Mark Wilson Date ▶ 3/26/2021 | 9:52 AM CDT

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.

23695336605

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 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.

DocuSigned by:
ERO's signature ▶ Allycia Solecki Date ▶ 3/25/2021 | 9:32 PM CDT
E=1CC852993547E...

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

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2019)

Form 990
(Rev. January 2020)
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)

OMB No. 1545-0047

2019

Open to Public Inspection

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the **2019** calendar year, or tax year beginning **JUL 1, 2019** and ending **JUN 30, 2020**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <div style="border: 1px solid black; padding: 2px;">AMERICAN BIBLE SOCIETY</div> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <div style="border: 1px solid black; padding: 2px;">101 N INDEPENDENCE MALL E FL 8</div> City or town, state or province, country, and ZIP or foreign postal code <div style="border: 1px solid black; padding: 2px;">PHILADELPHIA, PA 19106-2155</div> F Name and address of principal officer: ROBERT BRIGGS SAME AS C ABOVE	D Employer identification number <div style="border: 1px solid black; padding: 2px;">13-1623885</div> E Telephone number <div style="border: 1px solid black; padding: 2px;">(215) 309-0900</div> G Gross receipts \$ 592,551,981. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.AMERICANBIBLE.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1816 M State of legal domicile: NY

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO MAKE THE BIBLE AVAILABLE TO EVERY PERSON IN A LANGUAGE AND FORMAT EACH CAN... SEE SCHEDULE O		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	19
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	345
	6	Total number of volunteers (estimate if necessary)	6	225
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	42,560.
	b Net unrelated business taxable income from Form 990-T, line 39	7b	-3,419.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	59,480,874.	58,583,048.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	27,953,608.	35,105,701.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,437,302.	3,416,690.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	91,871,784.	97,105,439.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	37,901,326.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	33,245,455.	34,904,970.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	1,805,551.	1,360,984.
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 13,976,744.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	41,636,171.	35,800,209.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	114,588,503.	100,598,433.
19		Revenue less expenses. Subtract line 18 from line 12	-22,716,719.	-3,492,994.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	770,761,415.	726,218,047.
	21	Total liabilities (Part X, line 26)	103,645,354.	100,139,901.
	22	Net assets or fund balances. Subtract line 21 from line 20	667,116,061.	626,078,146.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <div style="border: 1px solid black; padding: 2px; margin-top: 10px;">MARK WILSON, TREASURER</div>	Date <div style="border: 1px solid black; padding: 2px; margin-top: 10px;"></div>		
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name ALYCIA SOLECKI	Preparer's signature <div style="border: 1px solid black; padding: 2px; margin-top: 10px;"><i>Alycia Solecki</i></div>	Date 3/25/2021	Check if self-employed <input type="checkbox"/> PTIN P01272637
	Firm's name ▶ GRANT THORNTON LLP Firm's address ▶ 2001 MARKET STREET, SUITE 700 PHILADELPHIA, PA 19103		Firm's EIN ▶ 36-6055558 Phone no. 215-561-4200	

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:**SCHEDULE O****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 \$ 79,220,364. including grants of \$ 28,532,270.) (Revenue \$ 38,522,391.)**ATTACHMENT 2****4b** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **79,220,364.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8 X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 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>	21 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 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>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3457
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a 345		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a X	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a X	
b If "Yes," enter the name of the foreign country BRAZIL, TURKEY		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	X
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	X
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state?	13a	
Note: See the instructions for additional information the organization must report on Schedule O.		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	X
If "Yes," see instructions and file Form 4720, Schedule N.		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
If "Yes," complete Form 4720, Schedule O.		

Form 990 (2019)

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 on Schedule O. See instructions.

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

Section A. Governing Body and Management

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	19			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b Enter the number of voting members included on line 1a, above, who are independent		18		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **AK, CA, CO, DC, FL, HI, IL, KY, LA, MD, MN, MS**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on 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 **MARK WILSON - 215-309-0900**
101 N INDEPENDENCE MALL E FL 8, PHILADELPHIA, PA 19106-2155

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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.
- See instructions for the order in which to list the persons above.

☐ 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 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) ROY L. PETERSON PRESIDENT & CEO (END DEC 2019)	40.00 0.00	X		X				400,067.	0.	57,404.
(2) LAURA DABKOWSKI SVP (END DEC 2019)	40.00 0.00			X				299,419.	0.	49,559.
(3) ROBERT BRIGGS SVP/ INTERIM PRES & CEO	40.00 5.00	X		X				264,069.	0.	48,389.
(4) JAMES PUCHY DIRECTOR	40.00 5.00				X			229,715.	0.	44,722.
(5) MARK WILSON CFO	40.00 5.00			X				213,650.	0.	53,753.
(6) NICHOLAS PAGANO DIRECTOR	40.00 0.00				X			199,001.	0.	68,173.
(7) ANDREW L. HOOD VP	40.00 0.00			X				206,071.	0.	53,519.
(8) STEVEN KAO VP/GENERAL COUNSEL	40.00 0.00			X				207,070.	0.	47,892.
(9) PATRICK MURDOCK DIRECTOR	40.00 0.00					X		194,335.	0.	53,123.
(10) HERBERT LEE MANIS DIRECTOR (END JUNE 2020)	40.00 0.00				X			199,033.	0.	41,456.
(11) MARK FORSHAW DIRECTOR (END JUNE 2020)	40.00 0.00					X		187,470.	0.	52,754.
(12) JOHN P GRECO DIRECTOR	40.00 0.00					X		175,517.	0.	58,656.
(13) MARCO HERREA DIRECTOR (END DEC 2019)	40.00 0.00				X			189,753.	0.	41,672.
(14) WHITNEY KUNIHM SVP	40.00 0.00			X				188,307.	0.	42,292.
(15) SUSAN B HARPER DIRECTOR	40.00 0.00					X		174,793.	0.	51,363.
(16) JANET GRELL DIRECTOR	40.00 0.00					X		189,124.	0.	29,549.
(17) JEFF BROWN CHAIRMAN	7.00 0.00	X		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 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			
(18) KAREN LOUIE VICE CHAIR (END JUNE 2020)	6.00 0.00	X		X				0.	0.	0.
(19) ANGELA WILLIAMS VICE CHAIR (END JUNE 2020)	3.00 0.00	X		X				0.	0.	0.
(20) KATHERINE BARNHART RECORDING SECRETARY	3.00 0.00	X		X				0.	0.	0.
(21) NICK ATHENS DIRECTOR	6.00 0.00	X						0.	0.	0.
(22) MARY E. BANKS DIRECTOR	3.00 0.00	X						0.	0.	0.
(23) TESSIE DEVORE DIRECTOR	3.00 0.00	X						0.	0.	0.
(24) YOLANDA HEGNGI DIRECTOR (END OCT 2019)	3.00 0.00	X						0.	0.	0.
(25) ED KOBEL DIRECTOR (END JUNE 2020)	3.00 0.00	X						0.	0.	0.
(26) GEORGE KOVOOR DIRECTOR	3.00 0.00	X						0.	0.	0.
1b Subtotal								3,517,394.	0.	794,276.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								3,517,394.	0.	794,276.

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 **16**

3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3	X	
4	X	
5		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

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

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
RKD GROUP, INC., 3400 WATERVIEW PKWY STE 250, RICHARDSON, TX 75080-1560	DIRECT MAIL	12,977,220.
LF DRISCOLL, LLC, 401 E. CITY LINE AVENUE #500, BALA CYNWD, PA 19004	CONSTRUCTION MANAGEMENT	8,152,116.
LOCAL PROJECTS, LLC, 123 WILLIAM STREET, SUITE 801, NEW YORK, NY 10038	EXHIBIT DESIGN	4,421,687.
SHERIDAN PUBLISHING, 5100 33RD STREET SE, GRAND RAPIDS, MI 49512-2062	BIBLE DISTRIBUTION	1,356,081.
RECOURSE ONE PO BOX 839, TULSA, OK 74101	WAREHOUSING/LOGISTIC	1,328,361.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **72**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2019)

Part VIII Statement of RevenueCheck 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
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	58,583,048.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 371,776.				
	h Total. Add lines 1a-1f				58,583,048.		
Program Service Revenue	2 a			Business Code			
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			10,314,174.		42,560.
4 Income from investment of tax-exempt bond proceeds							
5 Royalties			1,620,255.			1,620,255.	
6 a Gross rents		6a	(i) Real	(ii) Personal			
b Less: rental expenses ...		6b					
c Rental income or (loss)		6c					
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses		7b	492,987,430.				
c Gain or (loss)		7c	24,791,527.				
d Net gain or (loss)			24,791,527.			24,791,527.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b	3,745,125.					
c Net income or (loss) from sales of inventory			1,286,013.	1,286,013.			
Miscellaneous Revenue	11 a OTHER REVENUE			Business Code			
	b			900099	510,422.	201,415.	309,007.
	c						
	d All other revenue						
	e Total. Add lines 11a-11d				510,422.		
	12 Total revenue. See instructions				97,105,439.	1,487,428.	42,560.

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 ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	6,674,534.	6,674,534.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	21,857,736.	21,857,736.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,596,154.	2,043,083.	171,458.	381,613.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	20,886,075.	16,436,614.	1,379,383.	3,070,078.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,297,322.	2,549,663.	342,156.	405,503.
9 Other employee benefits	6,594,115.	5,189,339.	435,496.	969,280.
10 Payroll taxes	1,531,304.	1,205,083.	101,132.	225,089.
11 Fees for services (nonemployees):				
a Management				
b Legal	84,989.	75,277.		9,712.
c Accounting	261,797.		261,797.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	1,360,984.			1,360,984.
f Investment management fees	2,857,382.		2,857,382.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	8,409,771.	8,112,472.	297,299.	
12 Advertising and promotion				
13 Office expenses	2,272,808.	1,631,239.	380,829.	260,740.
14 Information technology	2,452,713.	1,689,485.	147,154.	616,074.
15 Royalties				
16 Occupancy	4,820,072.	3,899,735.	559,022.	361,315.
17 Travel	937,719.	680,898.	71,555.	185,266.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	179,884.	148,842.	12,515.	18,527.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,046,872.	759,771.	160,476.	126,625.
23 Insurance	549,038.	271,898.	161,725.	115,415.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINTINGS AND PUBLICATIONS	7,094,452.	3,607,736.	802.	3,485,914.
b POSTAGE AND MAILINGS	4,353,644.	2,125,847.	4,343.	2,223,454.
c ALL OTHER EXPENSES	278,124.	157,773.	23,644.	96,707.
d BANK FEES AND COMPLIANCE	200,944.	103,339.	33,157.	64,448.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	100,598,433.	79,220,364.	7,401,325.	13,976,744.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	12,312,422.	5,810,175.	0.	6,502,247.

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,313,347.	1	13,634,392.
	2 Savings and temporary cash investments	52,464,969.	2	17,161,765.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	14,060,244.	4	9,838,549.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	5,453,145.	8	4,984,305.
	9 Prepaid expenses and deferred charges	4,401,033.	9	4,412,521.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 49,679,667.		
	b Less: accumulated depreciation	10b 4,550,243.		
	11 Investments - publicly traded securities	19,759,972.	10c	45,129,424.
	12 Investments - other securities. See Part IV, line 11	181,590,043.	11	192,752,419.
	13 Investments - program-related. See Part IV, line 11	465,143,604.	12	412,665,869.
	14 Intangible assets	0.	13	0.
	15 Other assets. See Part IV, line 11		14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	25,575,058.	15	25,638,803.	
17 Accounts payable and accrued expenses	770,761,415.	16	726,218,047.	
Liabilities	18 Grants payable	17,559,929.	17	13,742,535.
	19 Deferred revenue		18	
	20 Tax-exempt bond liabilities	4,902,720.	19	5,373,750.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties		23	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		24	
	26 Total liabilities. Add lines 17 through 25	81,182,705.	25	81,023,616.
	27 Net assets without donor restrictions	103,645,354.	26	100,139,901.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	28 Net assets with donor restrictions	557,276,937.	27	514,500,873.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.	109,839,124.	28	111,577,273.
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	667,116,061.	32	626,078,146.
	33 Total liabilities and net assets/fund balances	770,761,415.	33	726,218,047.

Form 990 (2019)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	97,105,439.
2	Total expenses (must equal Part IX, column (A), line 25)	2	100,598,433.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,492,994.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	667,116,061.
5	Net unrealized gains (losses) on investments	5	-32,336,777.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-5,208,144.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	626,078,146.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

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

Form 990 (2019)

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

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	48563452.	47537766.	59070385.	59480874.	58583048.	273235525
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	48563452.	47537766.	59070385.	59480874.	58583048.	273235525
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1999698.
6 Public support. Subtract line 5 from line 4.						271235827

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	48563452.	47537766.	59070385.	59480874.	58583048.	273235525
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	9905509.	10839913.	12838100.	13597255.	11891869.	59072646.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	330,794.	65,755.	131,802.	36,372.	4,081.	568,804.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	916,886.	1085024.	960,424.	715,355.	510,422.	4188111.
11 Total support. Add lines 7 through 10						337065086
12 Gross receipts from related activities, etc. (see instructions)					12	20,336,568.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	80.47 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	80.76 %
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input checked="" type="checkbox"/>	
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	► <input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2019

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
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

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2018. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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 12a or 12b 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 or 990-EZ).</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 9a) 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 9a) 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 section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b 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
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 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? 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.		
1		
2 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? 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.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 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)? 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).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.			
a 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? 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.			
2a			
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? 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.			
2b			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a 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? Provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	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)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<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).		

Schedule A (Form 990 or 990-EZ) 2019

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 Total annual distributions. 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 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**SPECIAL EVENTS**

2017 AMOUNT: \$ 51,750.

OTHER INCOME

2015 AMOUNT: \$ 916,886.

2016 AMOUNT: \$ 1,085,024.

2017 AMOUNT: \$ 908,674.

2018 AMOUNT: \$ 715,355.

2019 AMOUNT: \$ 510,422.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

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 for 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

AMERICAN BIBLE SOCIETY**13-1623885****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
<u>1</u>		\$ <u>11,619,834.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>1,890,000.</u>	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.)
		\$ _____	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.)

Employer identification number

13-1623885

Part II

[illegible]

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 info. once.) ► \$ _____
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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

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

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019**Open to Public Inspection****Name of the organization**

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	3	
2 Aggregate value of contributions to (during year)	0.	
3 Aggregate value of grants from (during year)	104,250.	
4 Aggregate value at end of year	182,825.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2019

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 make 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 program
 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" on 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
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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 on Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	571,413,538.	588,257,493.	577,144,005.	544,380,899.	592,320,835.
b Contributions	2,536,408.	-3,467,214.	-5,995,128.	-3,449,385.	1,789,700.
c Net investment earnings, gains, and losses	1,621,520.	29,221,072.	52,861,007.	71,621,930.	-11,548,409.
d Grants or scholarships					
e Other expenditures for facilities and programs	58,219,008.	39,717,871.	32,791,320.	32,954,255.	36,742,639.
f Administrative expenses	2,764,116.	2,879,942.	2,961,071.	2,455,184.	1,438,588.
g End of year balance	514,588,342.	571,413,538.	588,257,493.	577,144,005.	544,380,899.

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

- a Board designated or quasi-endowment ☒ 93.43 %
 b Permanent endowment ☒ 3.84 %
 c Term endowment ☒ 2.73 %

The percentages on 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:

- (i) Unrelated organizations
 (ii) Related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on 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
1a Land				
b Buildings				0.
c Leasehold improvements		44,445,386.	2,462,222.	41,983,164.
d Equipment		4,068,111.	2,088,021.	1,980,090.
e Other		1,166,170.		1,166,170.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				45,129,424.

Schedule D (Form 990) 2019

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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) EQUITIES	203,671,859.	END-OF-YEAR MARKET VALUE
(B) ABSOLUTE RETURN	78,967,469.	END-OF-YEAR MARKET VALUE
(C) FIXED INCOME	42,447,186.	END-OF-YEAR MARKET VALUE
(D) REAL ASSETS	42,670,805.	END-OF-YEAR MARKET VALUE
(E) PRIVATE EQUITY	44,908,550.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	412,665,869.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on 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)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on 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) PAYABLE UNDER SECURITIES LOAN	
(3) AGREEMENT	948,507.
(4) DEFERRED ALLOWANCE FROM LEASE	
(5) ACTIVITY	16,651,077.
(6) OBLIGATIONS UNDER CHARITABLE	
(7) REMAINDER TRUST	4,903,851.
(8) ANNUITIES PAYABLE	20,249,718.
(9) ACCRUED POSTRETIREMENT BENEFITS	38,270,463.
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	81,023,616.

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 FASB 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" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	

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

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

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	

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.

SCHEDULE D, PART III, LINE 1A AND 4

AMERICAN BIBLE SOCIETY MAINTAINS A RARE SCRIPTURE COLLECTION THAT HAS BEEN ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE AMERICAN 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

Part XIII Supplemental Information (continued)

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

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 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 STATUTE OF LIMITATIONS ON THE BIBLE SOCIETY'S U.S. FEDERAL

Part XIII Supplemental Information *(continued)*

AND STATE RETURNS REMAINS OPEN FOR THREE YEARS FOLLOWING THE YEAR THEY ARE FILED.

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)**Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019Open to Public
Inspection

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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING		2,671,333.
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		1,059,233.
NORTH AMERICA	0	0	GRANTMAKING		7,555.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		1,550,506.
RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING		459,230.
SOUTH AMERICA	0	0	GRANTMAKING		1,523,616.
SOUTH ASIA	0	0	GRANTMAKING		336,762.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		4,229,970.
3 a Subtotal	0	0			11,838,205.
b Total from continuation sheets to Part I	0	10			38,837,245.
c Totals (add lines 3a and 3b)	0	10			50,675,450.

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

Schedule F (Form 990) 2019

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	GRANTMAKING		1,523,616.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		8,495,914.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	4	PROGRAM	MINISTRY PROJECT MANAGEMENT; BIBLE TRANSLATION	132,939.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	3	PROGRAM	MINISTRY PROJECT MANAGEMENT; BIBLE TRANSLATION	4,819.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	3	PROGRAM	MINISTRY PROJECT MANAGEMENT; BIBLE TRANSLATION	102,649.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	INVESTMENT		175,788.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	INVESTMENT		17,898.
CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENT		28,383,622.
Totals		10			38,837,245.

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	GRANTMAKING	2671333.		0.		
		EAST ASIA AND THE PACIFIC	GRANTMAKING	1059233.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GRANTMAKING	8495914.		0.		
		MIDDLE EAST AND NORTH AFRICA	GRANTMAKING	1550506.		0.		
		NORTH AMERICA	GRANTMAKING	7,555.		0.		
		RUSSIA AND NEIGHBORING STATES	GRANTMAKING	459,230.		0.		
		SOUTH AMERICA	GRANTMAKING	1523616.		0.		
		SOUTH ASIA	GRANTMAKING	336,762.		0.		

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

15

3 Enter total number of other organizations or entities

1

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

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)
		SUB-SAHARAN AFRICA	GRANTMAKING	4228827.		0.		

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 separately 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; don't 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ☐ **Yes** ☒ **No**

Schedule F (Form 990) 2019

Part V Supplemental Information

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.

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. ABS 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, ABS 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.

Part II Fundraising Events. Complete if the organization answered "Yes" on 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))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

Part III Gaming. Complete if the organization answered "Yes" on 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))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 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	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 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: _____

10a 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 | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name **▶** _____Address **▶** _____

- 15a** 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 explanations 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.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: RKD GROUP

(I) ADDRESS OF FUNDRAISER: 3400 WATERVIEW PKWY, #250, RICHARDSON, TX 75080

(I) NAME OF FUNDRAISER: MDS COMMUNICATIONS CORP

(I) ADDRESS OF FUNDRAISER: 545 WEST JUANITA AVE, MESA, AZ 85210

(I) NAME OF FUNDRAISER: AMERIDIAL

Part IV Supplemental Information *(continued)*

(I) ADDRESS OF FUNDRAISER: 4877 HIGBEE AVENUE, 2ND FL, CANTON, OH 44718

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

2 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" on 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 noncash assistance	(h) Purpose of grant or assistance
THE 1687 FOUNDATION, BOOK MINISTRY DIVISION - PO BOX 1961 - SISTERS, OR 97759-1961	26-3772474	501(C)(3)	0.	234,538.	FMV		BIBLE ENGAGEMENT
AMERICAN REHABILITATION MINISTRIES 3605 N MAIN ST JOPLIN, MO 64801-7665	43-1037106	501(C)(3)	0.	30,855.	FMV		BIBLE ENGAGEMENT
SALVATION ARMY 3238 JONAGOLD DRIVE HARRISBURG, PA 17110	13-5562351	501(C)(3)	0.	22,014.	FMV		BIBLE ENGAGEMENT
RECRUIT TRAINING COMMAND/CHAPEL 3355 ILLINOIS ST GREAT LAKES, IL 60088-3115	34-9990000	GVMT	0.	21,843.	FMV		BIBLE ENGAGEMENT
RELIGIOUS EDUCATION CENTER /CREC 14130 3RD ST BLDG 340 FORT LEONARD WOOD, MO 65473-9167	35-9990000	501(C)(3)	0.	15,152.	FMV		BIBLE ENGAGEMENT
GREEN PASTURES MINISTRIES 370 RIVER REST WAY APT 7 NEWPORT, TN 37821-2050	91-2147777	501(C)(3)	0.	14,704.	FMV		BIBLE ENGAGEMENT

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

61.

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

0.

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

Schedule I (Form 990) (2019)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
NATIONAL PRAYER BREAKFAST 1919 CONNECTICUT AVE NW WASHINGTON, DC 20009-5701	20-0408543	501(C)(3)	0.	14,525.	FMV		BIBLE ENGAGEMENT
OPERATION COMPASSION 1120 URBANE RD NE CLEVELAND, TN 37312-4742	62-1697490	501(C)(3)	0.	14,215.	FMV		BIBLE ENGAGEMENT
ORLANDO VA MEDICAL CENTER 13800 VETERANS WAY ORLANDO, FL 32827	80-1394976	GVMT	0.	14,122.	FMV		BIBLE ENGAGEMENT
MCRD PARRIS ISLAND RELIGIOUS MINISTRIES CENTER - 854 BLVD DE FRANCE - PARRIS ISLAND, SC 29905	35-9990000	GVMT	0.	13,925.	FMV		BIBLE ENGAGEMENT
GATEWAY CHAPEL 1850 N BARNES AVE BLDG 6300 LACKLAND A F B, TX 78236-5542	84-9990000	GVMT	0.	13,634.	FMV		BIBLE ENGAGEMENT
ATLANTA VA MEDICAL CENTER 1670 CLAIRMONT RD DECATUR, GA 30033-4004	58-2091280	GVMT	0.	13,279.	FMV		BIBLE ENGAGEMENT
KIDS COMMUNITY BIBLE STUDIES 204 N POTTER ST FREEBURG, IL 62243-1032	37-1376944	501(C)(3)	0.	12,506.	FMV		BIBLE ENGAGEMENT
MAIN POST CHAPEL (GARRISON) 13566 MINNESOTA AVE BLDG 608 FORT LEONARD WOOD, MO 65473-9170	35-9990000	GVMT	0.	12,282.	FMV		BIBLE ENGAGEMENT
CARL VINSON VA MEDICAL CENTER 1826 VETERANS BLVD DUBLIN, GA 31021-3620	58-2080668	GVMT	0.	10,473.	FMV		BIBLE ENGAGEMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
WILMINGTON VAMC 1601 KIRKWOOD HWY WILMINGTON, DE 19805-4917	51-0065004	GVMT	0.	10,179.	FMV		BIBLE ENGAGEMENT
SCOTT HAGEMAN 8443 WOODREED DR WEST CHESTER, OH 45069-5890	46-5436621	501(C)(3)	0.	8,157.	FMV		BIBLE ENGAGEMENT
SATURATE NYC METRO 77 ALASKA ST STATEN ISLAND, NY 10310-1203	27-4637480	501(C)(3)	0.	8,088.	FMV		BIBLE ENGAGEMENT
EDGEWOOD BAPTIST CHURCH 3564 FORREST RD COLUMBUS, GA 31907-2599	58-0908581	501(C)(3)	0.	8,001.	FMV		BIBLE ENGAGEMENT
2ND BN 60TH IN REGT 5422 JACKSON BLVD COLUMBIA, SC 29207-5022	35-9990000	GVMT	0.	7,723.	FMV		BIBLE ENGAGEMENT
VA MEDICAL CENTER CHAPEL CIRCLE DRIVE - BUILDING 314 PERRY POINT, MD 21902	74-1612229	GVMT	0.	7,364.	FMV		BIBLE ENGAGEMENT
3-13TH INFRANTRY BN JACKSON BLVD BLDG 4420 COLUMBIA, SC 29207-6100	35-9990000	GVMT	0.	7,145.	FMV		BIBLE ENGAGEMENT
HAMPTON VA MEDICAL CENTER 100 EMANCIPATION DR HAMPTON, VA 23667-0001	54-1172096	GVMT	0.	7,072.	FMV		BIBLE ENGAGEMENT
VETERANS MEDICAL CENTER 1500 E WOODROW WILSON AVE JACKSON, MS 39216-5116	35-9990000	GVMT	0.	6,897.	FMV		BIBLE ENGAGEMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CAIRNS AIRFIELD BUILDING 30601 PETER STREET FORT RUCKER, AL 36322	35-9990000	GVMT	0.	6,708.	FMV		BIBLE ENGAGEMENT
CENTRAL TEXAS VETERANS HCS (125T) 1901 S 1ST ST TEMPLE, TX 76504-7451	74-2623309	501(C)(3)	0.	6,599.	FMV		BIBLE ENGAGEMENT
NAMI ORANGE COUNTY 1810 E 17TH ST SANTA ANA, CA 92705-8604	95-3726369	501(C)(3)	0.	6,512.	FMV		BIBLE ENGAGEMENT
AUDIE L. MURPHY VA HOSPITAL 7400 MERTON MINTER ST SAN ANTONIO, TX 78229-4404	74-1612229	GVMT	0.	6,373.	FMV		BIBLE ENGAGEMENT
SUPPORT MILITARY SPOUSES 10177 N KINGS HWY UNIT E9 MYRTLE BEACH, SC 29572-4033	35-9990000	501(C)(3)	0.	6,322.	FMV		BIBLE ENGAGEMENT
STEVE SAVELICH 2145 24TH ST N ARLINGTON, VA 22207-4960	20-0408543	501(C)(3)	0.	6,225.	FMV		BIBLE ENGAGEMENT
OKLAHOMA CITY VA MEDICAL CENTER 921 NE 13TH ST OKLAHOMA CITY, OK 73104-5007	73-1097102	GVMT	0.	6,179.	FMV		BIBLE ENGAGEMENT
6TH AMW CHAPEL - 927TH WING 2204 ADMINISTRATION AVE TAMPA, FL 33621-5300	35-9990000	GVMT	0.	6,160.	FMV		BIBLE ENGAGEMENT
CAMPUS CRUSADE PROVISION 2401 W COMMERCE ST ATT: BOBBY CRIOLLO - SAN ANTONIO, TX 78207-3832	95-6006123	501(C)(3)	0.	6,058.	FMV		BIBLE ENGAGEMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
THE WARRIORS JOURNEY 3003 E CHESTNUT EXPY STE 2001 SPRINGFIELD, MO 65802-2565	75-2772633	501(C)(3)	0.	5,985.	FMV		BIBLE ENGAGEMENT
5-7 CAV UMT 1218 WILLIAM H WILSON AVE # 639 FORT STEWART, GA 31314-3304	35-9990000	GVMT	0.	5,968.	FMV		BIBLE ENGAGEMENT
2ND BATTALION, 39TH INFANTRY REGIMENT - 10400 HAMPTON PKWY - COLUMBIA, SC 29207-6820	35-9990000	GVMT	0.	5,962.	FMV		BIBLE ENGAGEMENT
1-31 FA BN 5595 ROTHWELL ST FT SILL, OK 73503	35-9990000	GVMT	0.	5,892.	FMV		BIBLE ENGAGEMENT
1-81ST ARMORED BATTALION UMT 7148 2ND CALVARY REGIMENT ST FORT BENNING, GA 31905-5431	35-9990000	GVMT	0.	5,726.	FMV		BIBLE ENGAGEMENT
JONAH E. KELLEY ARMY RESERVE CENTER - BUILDING 2101 STATE ROUTE 68 - FORT DIX, NJ 08640	35-9990000	GVMT	0.	5,537.	FMV		BIBLE ENGAGEMENT
VA LONG BEACH HEALTHCARE SYSTEMS 5901 E 7TH ST # 125 LONG BEACH, CA 90822-5299	95-1652897	GVMT	0.	5,418.	FMV		BIBLE ENGAGEMENT
VA MEDICAL CENTER 2300 RAMSEY ST FAYETTEVILLE, NC 28301-3856	56-1303855	GVMT	0.	5,309.	FMV		BIBLE ENGAGEMENT
HUNTER HOMES MCGUIRE VAMC 1201 BROAD ROCK BLVD RICHMOND, VA 23249-0001	54-0515611	GVMT	0.	5,076.	FMV		BIBLE ENGAGEMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
HOSANNA FAITH COMES BY HEARING 2421 AZTEC ROAD NE ALBUQUERQUE, NM 87107-4200	85-0223225	501(C)(3)	500,000.	0.			PROGRAM SERVICES
TYNDALE HOUSE PUBLISHERS 351 EXECUTIVE DRIVE CAROL STREAM, IL 60188-2420	82-2635353	501(C)(3)	7,000.	0.			PROGRAM SERVICES
ELAM MINISTRIES 5755 NORTH POINT PARKWAY SUITE 217 ALPHARETTA, GA 30022	58-2134253	501(C)(3)	150,000.	0.			PROGRAM SERVICES
WORD 4 ASIA - 5625 E SANTA ANA CANYON RD ANAHEIM, CA 92807-3125	53-1588858	501(C)(3)	924,000.	0.			PROGRAM SERVICES
REACHING UNREACHED NATIONS 1732 S PARK CT CHESAPEAKE, VA 23320-8934	54-1563242	501(C)(3)	287,498.	0.			PROGRAM SERVICES
GLOBAL BIBLE INITIATIVE INC. 2719 PINE DUNES DR SW WYOMING, MI 49418-9216	81-2408473	501(C)(3)	875,000.	0.			PROGRAM SERVICES
DEAF BIBLE SOCIETY, INC. 2820 RICHMOND DR NE ALBUQUERQUE, NM 87107-1919	47-4285852	501(C)(3)	238,118.	0.			PROGRAM SERVICES
DOOR INTERNATIONAL 135 N STATE ST STE 200 ZEELAND, MI 49464-1283	56-1251149	501(C)(3)	278,381.	0.			PROGRAM SERVICES
TALKING BOOKS INTERNATIONAL INC 419 E GRAND AVE ESCONDIDO, CA 92025-3303	33-0975333	501(C)(3)	25,500.	0.			PROGRAM SERVICES

Schedule I (Form 990)

Part III

Grants and Other Assistance to Domestic Individuals. 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 noncash assistance

Part IV

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

SCHEDULE I, PART I, LINE 2

EACH GRANT REQUEST IS CAREFULLY REVIEWED, AND AN AMERICAN BIBLE SOCIETY

GRANT APPLICATION KIT, COMPLETE WITH TESTIMONIAL FORMS/OPPORTUNITIES

FOR FEEDBACK ON HOW THE SCRIPTURE WILL BE USED IS ISSUED TO THOSE

REQUESTING THE FREE SCRIPTURE RESOURCES. ONCE REVIEWED AND APPROVED,

AMERICAN BIBLE SOCIETY SHIPS THE BIBLE BASED RESOURCES AND RECORDS THE

FULL DETAIL OF THE END RECIPIENT, HOW THEY PLAN ON USING THE SCRIPTURES

IN MINISTRY/IN OUTREACH; ALONG WITH THE OPPORTUNITY TO PROVIDE ONGOING

REPORTS ON USAGE AND SUSTAINED SCRIPTURE ENGAGEMENT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

AMERICAN BIBLE SOCIETY

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 on 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 (such as 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 on line 1a?

3 Indicate which, if any, of the following the 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 on 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 on 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" on line 5a or 5b, describe in Part III.

6 For persons listed on 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" on line 6a or 6b, describe in Part III.

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

8 Were any amounts reported on 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" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b	X	
2	X	
4a	X	
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

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 on 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 aren't 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 on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ROY L. PETERSON PRESIDENT & CEO (END DEC 2019)	(i)	394,542.	0.	5,525.	32,000.	25,404.	457,471.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) LAURA DABKOWSKI SVP (END DEC 2019)	(i)	113,412.	0.	186,007.	13,233.	36,326.	348,978.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ROBERT BRIGGS SVP/ INTERIM PRES & CEO	(i)	260,505.	0.	3,564.	21,366.	27,023.	312,458.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JAMES PUCHY DIRECTOR	(i)	226,581.	0.	3,134.	17,823.	26,899.	274,437.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MARK WILSON CFO	(i)	212,575.	0.	1,075.	17,565.	36,188.	267,403.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NICHOLAS PAGANO DIRECTOR	(i)	197,185.	0.	1,816.	31,136.	37,037.	267,174.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ANDREW L. HOOD VP	(i)	205,380.	0.	691.	17,345.	36,174.	259,590.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) STEVEN KAO VP/GENERAL COUNSEL	(i)	205,094.	0.	1,976.	10,821.	37,071.	254,962.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) PATRICK MURDOCK DIRECTOR	(i)	192,581.	0.	1,754.	16,086.	37,037.	247,458.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) HERBERT LEE MANIS DIRECTOR (END JUNE 2020)	(i)	196,208.	0.	2,825.	14,610.	26,846.	240,489.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MARK FORSHAW DIRECTOR (END JUNE 2020)	(i)	186,545.	0.	925.	15,756.	36,998.	240,224.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) JOHN P GRECO DIRECTOR	(i)	174,654.	0.	863.	22,646.	36,010.	234,173.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) MARCO HERREA DIRECTOR (END DEC 2019)	(i)	185,122.	0.	4,631.	15,181.	26,491.	231,425.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) WHITNEY KUNIHM SVP	(i)	185,185.	0.	3,122.	15,327.	26,965.	230,599.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) SUSAN B HARPER DIRECTOR	(i)	172,330.	0.	2,463.	14,420.	36,943.	226,156.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) JANET GRELL DIRECTOR	(i)	187,346.	0.	1,778.	15,262.	14,287.	218,673.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

Part III Supplemental Information

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.

PART I, 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).

PART I, LINE 4A:

LAURA DABKOWSKI - SEVERANCE/CHANGE OF CONTROL PAYMENT \$136,628

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2019

Open to Public
Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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	30	371,776.	FMV
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

30

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 isn't required to be used for
exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a	X	
33		

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

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

Schedule M (Form 990) 2019

Part II

Supplemental Information. 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.

SCHEDULE M, LINE 32B:

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

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

FORM 990, PART I - ORGANISATION MISSION

....UNDERSTAND AND AFFORD. SO ALL PEOPLE MAY EXPERIENCE ITS
LIFE-CHANGING MESSAGE.

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.

IN 2020, AMERICAN BIBLE SOCIETY CONTINUED ITS 204TH YEAR OF BIBLE-BASED
MINISTRY AS WE FAITHFULLY MOVED AHEAD WITH OUR VISION TO SEE MILLIONS
OF PEOPLE LIVING IN THE UNITED STATES ACTIVELY ENGAGED IN GOD'S WORD.
WE WILL REACH THIS GOAL BY WORKING CLOSELY WITH CHURCHES AND OTHER
BIBLE-BASED MINISTRIES IN CITIES ACROSS THE U.S., FEATURING OUR WIDE
VARIETY OF SCRIPTURE RESOURCES IN PRINT AND DIGITAL FORMATS, AS WELL AS
OUR BIBLE-BASED TRAUMA HEALING MINISTRY TO EASE ALL WOUNDED HEARTS WITH
THE HEALING POWER OF GOD'S WORD.

WE ARE ALSO PROUD TO CONTINUE OUR GLOBAL MINISTRY AS WE SEEK TO FINISH
THE BIBLE TRANSLATION WORK AND SEE SCRIPTURE TRANSLATED INTO 100% OF
THE WORLD'S LANGUAGES TO PROVIDE FIRST ENGAGEMENT OPPORTUNITIES FOR
THOSE WHO HAVE YET TO EXPERIENCE THE BIBLE'S LIFE-CHANGING MESSAGE.

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

FORM 990, PART VI, SECTION B, LINE 11B:

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 DIRECTORS 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.

FORM 990, PART VI, SECTION B, LINE 12C:

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.

FORM 990, PART VI, SECTION B, LINE 15:

LINE 15: COMPENSATION FOR THE PRESIDENT & CEO IS DETERMINED BY A COMPENSATION COMMITTEE APPOINTED BY THE BOARD OF DIRECTORS. 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 OFFICER 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 OFFICERS OF THE BOARD RECOMMEND THE CEO COMPENSATION TO THE FULL BOARD OF DIRECTORS FOR ITS APPROVAL. THE BOARD OF DIRECTORS' APPROVAL IS DOCUMENTED IN MINUTES. COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION IS DETERMINED USING VARIOUS

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

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.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK, CA, CO, DC, FL, HI, IL, KY, LA, MD, MN, MS, NV, NH, NY, ND, OR, SC, TN, VA, WA, WI, WY, OH

FORM 990, PART VI, SECTION C, LINE 19:

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 19 MEMBERS OF THE BOARD OF DIRECTORS. SINCE ONE MEMBER OF THE BOARD WAS COMPENSATED, THE BIBLE SOCIETY IS REPORTING 18 INDEPENDENT VOTING MEMBERS OF THE BOARD OF DIRECTORS AT THE END OF THE TAX YEAR.

THERE IS AN EXECUTIVE COMMITTEE OF THE BOARD WHICH HAS THE AUTHORITY TO ACT ON BEHALF OF THE FULL BOARD WHEN APPLICABLE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

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

PENSION RELATED ACTIVITY	-4,938,298.
CHANGE IN VALUE IN SPLIT-INTEREST AGREEMENTS	-146,041.
DEPRECIATION IN FAIR VALUE OF THIRD-PARTY TRUSTS	-123,805.
TOTAL TO FORM 990, PART XI, LINE 9	-5,208,144.

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

AMERICAN BIBLE SOCIETY HELPS PEOPLE EXPERIENCE GOD THROUGH THE BIBLE.

WE TRANSLATE THE BIBLE, DISTRIBUTE THE BIBLE, ENGAGE PEOPLE WITH THE BIBLE, AND ADVOCATE FOR THE BIBLE'S MESSAGE OF HOPE HERE IN AMERICA AND EVERYWHERE IN THE WORLD. THROUGH THE CHURCH AND A GLOBAL NETWORK OF LOCAL BIBLE SOCIETIES, WE CARRY THE GOSPEL MESSAGE WHERE IT IS NEEDED MOST. OUR RESEARCH AND OUR EXPERIENCE TELL US THE BIBLE MAKES US MORE GENEROUS, MORE COMPASSIONATE, MORE LOVING TOWARD OUR NEIGHBORS, AND MORE HOPEFUL ABOUT OUR FUTURE IN CHRIST. THAT'S WHY OUR MISSION SINCE 1816 HAS BEEN TO HELP ALL PEOPLE EXPERIENCE THE LIFE-CHANGING MESSAGE OF GOD'S WORD.

BEFORE PEOPLE CAN EXPERIENCE THE BIBLE, IT NEEDS TO BE AVAILABLE IN THEIR HEART LANGUAGE. WE ARE COMMITTED TO TRANSLATING GOD'S WORD INTO EVERY LIVING LANGUAGE BY 2033. TO ACCOMPLISH THIS GOAL, WE WORK WITH TRANSLATION PARTNERS IN 62 COUNTRIES, CURRENTLY SUPPORTING 182 LANGUAGE PROJECTS. WE PROVIDE TECHNICAL RESOURCES LIKE TRANSLATION SOFTWARE, TRANSLATOR TRAINING, AND PROGRAM DESIGN EXPERTISE, ENSURING THAT FIELD TEAMS HAVE EVERYTHING THEY NEED TO COMPLETE THEIR WORK.

ONCE THE BIBLE IS AVAILABLE, PEOPLE NEED TO BE ABLE TO ACCESS IT. THROUGH DISTRIBUTION, WE MAKE BIBLE OWNERSHIP AND DAILY SCRIPTURE ENGAGEMENT A REALITY FOR PEOPLE SEPARATED FROM GOD'S WORD BY BARRIERS

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

LIKE POVERTY OR PERSECUTION. WE BRING GOD'S HOPE TO ENTIRE NATIONS THROUGH MASSIVE INITIATIVES LIKE BIBLES FOR CHINA OR ONE MILLION BIBLES FOR LATIN AMERICA. IN ADDITION TO TRADITIONAL PRINTING AND DIGITAL FORMATS, WE PROMOTE VISUAL AND AUDIO VERSIONS OF SCRIPTURE LIKE THE JESUS FILM AND INITIATE BIBLE LISTENING GROUPS MEETING IN MORE THAN 40 COUNTRIES.

SIMPLY OWNING A BIBLE IS NOT THE END OF THE JOURNEY. IN ORDER FOR LIVES TO TRANSFORM, HEARTS MUST BE ENGAGED WITH THE TRUTH OF SCRIPTURE. WE CONTEXTUALIZE THE BIBLE FOR ALL PEOPLE AND BREAK DOWN BARRIERS THAT CAN KEEP COMMUNITIES FROM FULLY EXPERIENCING GOD'S WORD.

FOR UNITED STATES MILITARY MEMBERS, VETERANS, AND THEIR FAMILIES, GOD'S LOVE CAN FEEL FAR AWAY AMID THE UNIQUE CHALLENGES THAT COME WITH SERVING OUR NATION. OUR HISTORIC ARMED SERVICES MINISTRY PARTNERS WITH CHAPLAINS AND CHURCH LEADERS TO DEVELOP AND DELIVER LIFE-SAVING MINISTRY RESOURCES, HELPING HUNDREDS OF THOUSANDS OF OUR BRAVE SERVICE MEMBERS DISCOVER THE COMFORT OF THE SCRIPTURES.

FOR AN ESTIMATED 1 BILLION PEOPLE WORLDWIDE, THE MESSAGE OF THE BIBLE IS HIDDEN BEHIND BARRIERS OF PAIN, GRIEF, AND TRAUMA. IN THE UNITED STATES AND ABROAD, OUR BIBLE-BASED TRAUMA HEALING MINISTRY WORKS TO EQUIP CHURCHES TO OFFER HOPE AND HEALING TO THOSE WHO HAVE ENDURED TRAUMA. THROUGH A CURRICULUM THAT BLENDS MENTAL HEALTH BEST PRACTICES WITH BIBLICAL TRUTHS, HEALING GROUPS EXPERIENCE RESTORATION THROUGH GOD'S WORD. IN 2020, THIS MINISTRY REACHED MORE THAN 20,000 PEOPLE IN MORE THAN 60 COUNTRIES.

Name of the organization

AMERICAN BIBLE SOCIETY

Employer identification number

13-1623885

THE BIBLE IS FOR EVERYONE EVEN FOR THOSE WHO LIVE IN FREEDOM BUILT ON
BIBLICAL VALUES WITHOUT UNDERSTANDING THE BIBLE'S INFLUENCE ON OUR
HISTORY. THROUGH THE FAITH AND LIBERTY DISCOVERY INITIATIVE AND THE
FAITH AND LIBERTY DISCOVER CENTER IN PHILADELPHIA, WE ADVOCATE FOR A
COMPLETE VIEW OF AMERICAN HISTORY THROUGH THE LENS OF GOD'S WORD. WE
REMIND AMERICANS OF THEIR BIBLICAL HERITAGE THROUGH STORIES OF PAST
LEADERS, HEROES, AND EVERYDAY CITIZENS. WE EXPLORE THE BIBLICAL VALUES
THAT SHAPED THE AMERICAN STORY, PAVING THE WAY FOR FUTURE GENERATIONS
TO HAVE A CLEAR, ACTIVE UNDERSTANDING OF THE BIBLE'S PLACE IN OUR
HISTORY AND GOD'S PURPOSE FOR OUR LIVES.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

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.

(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

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.

(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
FAITH AND LIBERTY DISCOVERY CENTER - 83-2372645, 101 N INDEPENDENCE MALL E, PHILADELPHIA, PA 19106	MUSEUM	PENNSYLVANIA	501(C)(3)	LINE 7	ABS	X	

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

Schedule R (Form 990) 2019

SEE PART VII FOR CONTINUATIONS

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.

[illegible]

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.

[illegible]

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.

	Yes	No
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?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X
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.		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) FAITH AND LIBERTY DISCOVERY CENTER	R	9,696,056.	FMV
(2)			
(3)			
(4)			
(5)			
(6)			

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.

[illegible]

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:**NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:**

FAITH AND LIBERTY DISCOVERY CENTER

EIN: 83-2372645

101 N INDEPENDENCE MALL E

PHILADELPHIA, PA 19106

PRIMARY ACTIVITY: MUSEUM

DIRECT CONTROLLING ENTITY: ABS