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Form 990

## Return of Organization Exempt From Income Tax

OMB No 1545-0047

2012

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

A For the 2012 calendar year, or tax year beginning

04/01/2012, and ending

03/31/2013

<input type="checkbox"/> Check if applicable. <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <b>SOCIETY FOR PROMOTING THEOLOGICAL EDUCATION</b>			D Employer identification number <b>04-6092557</b>		
	Doing Business As			E Telephone number <b>617 502-9473</b>		
	Number and street (or P.O. box if mail is not delivered to street address) <b>SBA 255 STATE ST, 6TH FL</b>			Room/suite		
	City, town or post office, state, and ZIP code <b>BOSTON, MA 02109-2167</b>					
	F Name and address of principal officer					G Gross receipts \$ <b>859,087</b>
						H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
I Tax-exempt status <input checked="" type="checkbox"/> X 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: ► N/A					
K Form of organization <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		L Year of formation: <b>1984</b> M State of legal domicile: <b>MA</b>				

## Part I Summary

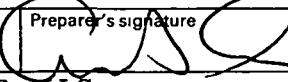
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <b>THE PRIMARY PURPOSE OF THIS ORGANIZATION IS TO PROVIDE SCHOLARSHIPS TO STUDENTS ATTENDING THE HARVARD DIVINITY SCHOOL</b>		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued 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	9
	4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4	9
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . . .	5	<b>NONE</b>
	6 Total number of volunteers (estimate if necessary) . . . . .	6	9
	7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	7a	<b>NONE</b>
	b Net unrelated business taxable income from Form 990-T, line 34 . . . . .	7b	<b>NONE</b>
	8 Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year	
	9 Program service revenue (Part VIII, line 2g) . . . . .	Current Year	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	124,844	162,106
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	124,844	162,106
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	72,000	72,000	
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . .			
14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . .			
16a Professional fundraising fees (Part IX, column (A), line 11e)			
b Total fundraising expenses (Part IX, column (D), line 25) ► <b>NONE</b>			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . .	24,104	25,733	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . . .	96,104	97,733	
19 Revenue less expenses. Subtract line 18 from line 12 . . . . .	28,740	64,373	
20 Total assets (Part X, line 16) . . . . .	Beginning of Current Year	End of Year	
21 Total liabilities (Part X, line 26) . . . . .	2,793,204	2,857,577	
22 Net assets or fund balances Subtract line 21 from line 20. . . . .	NONE	NONE	
	2,793,204	2,857,577	

## 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 <b>MICHAEL L. FAY, TREASURER</b>	Date <b>8/13/13</b>
	Type or print name and title <b>MICHAEL L. FAY, TREASURER</b>	

SCANNED 7/2013 SEP 17 2013

Paid Preparer Use Only	Print/Type preparer's name <b>ANDREW CORREIA</b>	Preparer's signature 	Date <b>08/12/2013</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00641207</b>
	Firm's name ► <b>BANYAN PARTNERS, LLC</b>			Firm's EIN ► <b>51-0592303</b>	
	Firm's address ► <b>255 STATE STREET, 6TH FLOOR; BOSTON, MA 02109-2167</b>			Phone no. <b>617-502-9433</b>	

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

JSA  
2E1010 1 0000

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### **Part III Statement of Program Service Accomplishments**

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

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

THE PRIMARY PURPOSE OF THIS ORGANIZATION IS TO PROVIDE SCHOLARSHIPS TO STUDENTS ATTENDING THE HARVARD DIVINITY SCHOOL

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 Q.

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 \$ \_\_\_\_\_ including grants of \$ 72,000. ) (Revenue \$ \_\_\_\_\_)  
HARVARD DIVINITY SCHOOL SCHOLARSHIP FUND

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

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

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

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

#### 4e Total program service expenses ►

## Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	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? If "Yes," complete Schedule C, Part I . . . . .	3 X	
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	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? If "Yes," complete Schedule C, Part III . . . . .	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? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II . . . . .	7 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	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? If "Yes," complete Schedule D, Part IV . . . . .	9 X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .	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? If "Yes," complete Schedule D, Part VI . . . . .	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? If "Yes," complete Schedule D, Part VII . . . . .	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? If "Yes," complete Schedule D, Part VIII . . . . .	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? If "Yes," complete Schedule D, Part IX . . . . .	11d X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	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)? If "Yes," complete Schedule D, Part X . . . . .	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . . . . .	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . .	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	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? If "Yes," complete Schedule F, Parts I and IV . . . . .	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV . . . . .	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV . . . . .	16 X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	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? If "Yes," complete Schedule G, Part II . . . . .	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	19 X	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	20a X	
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	20b	

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

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. . . . .	21	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . .	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J . . . . .	23	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If No, go to line 25 . . . . .	24a	X
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	24b	X
24c	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	X
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	24d	X
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .	25a	X
25b	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? If "Yes," complete Schedule L, Part I. . . . .	25b	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . .	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III . . . . .	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):		
28a	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. . . . .	28a	X
28b	b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. . . . .	28b	X
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . . .	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . .	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . . . . .	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . . . . .	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. . . . .	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? If "Yes," complete Schedule R, Part I . . . . .	33	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1. . . . .	34	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)? If "Yes," complete Schedule R, Part V, line 2 . . . . .	35b	X
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . .	36	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI . . . . .	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V . . . . . 

	Yes	No	
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	1a	2.	[REDACTED]
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		
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	0	[REDACTED]
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . . .	2b		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	3a	X	[REDACTED]
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b		
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	[REDACTED]
b If Yes, enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a	X	[REDACTED]
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		[REDACTED]
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		[REDACTED]
7 <b>Organizations that may receive deductible contributions under section 170(c).</b>	7a	X	
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? . . . . .	7b		[REDACTED]
b If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7c	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7d		[REDACTED]
d If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7e	X	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7f	X	[REDACTED]
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7g	X	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7h	X	[REDACTED]
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	8	X	
8 <b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	9a	X	[REDACTED]
9 <b>Sponsoring organizations maintaining donor advised funds.</b>	9b	X	
a Did the organization make any taxable distributions under section 4966? . . . . .	10a		[REDACTED]
b Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	10b		
10 <b>Section 501(c)(7) organizations.</b> Enter:	11a		[REDACTED]
a Gross income from members or shareholders . . . . .	11b		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	12a		[REDACTED]
12a <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12b		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	13a		[REDACTED]
13 <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	13b		
a Is the organization licensed to issue qualified health plans in more than one state? . . . . .	13c		[REDACTED]
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 . . . . .	14a		[REDACTED]
c Enter the amount of reserves on hand . . . . .	14b		
14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .			[REDACTED]
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .			

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

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

### Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year.	1a 9	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b Enter the number of voting members included in line 1a, above, who are independent	1b 9	
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, or 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 in 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?		
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?		
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
13 Did the organization have a written whistleblower policy?		
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?		
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?	16a X	
	16b	

### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ►

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

Own website  Another's website  Upon request  Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► WCPH AND D LLP TEL: (617) 526-6000

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

 Check if Schedule O contains a response to any question in this Part VII . . . . . 
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual or director	Institutional trustee	Officer	Key employee	Employee with highest compensation			
(1) REV. KENNETH A. CLARK ESO SECRETARY				X			NONE	NONE	NONE
(2) REV. JOSEPH A. BASSETT SECRETARY				X			NONE	NONE	NONE
(3) MICHAEL L. FAY TREASURER				X			NONE	NONE	NONE
(4) REV. LLEWELLYN P. SMITH PRESIDENT				X			NONE	NONE	NONE
(5) ALICE W. RICKSEN Clerk 8/13/13				X			NONE	NONE	NONE
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1b Sub-total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								<b>NONE</b>	<b>NONE</b>	<b>NONE</b>

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

Yes	No
3	X
4	X
5	X

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

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
<b>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</b> ► 0		

**Part VIII Statement of Revenue**Check if Schedule O contains a response to any question 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, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1a Federated campaigns . . . . .	1a			
	b Membership dues . . . . .	1b			
	c Fundraising events . . . . .	1c			
	d Related organizations . . . . .	1d			
	e Government grants (contributions) . . . . .	1e			
	f All other contributions, gifts, grants, and similar amounts not included above . . . . .	1f			
	g Noncash contributions included in lines 1a-1f: \$				
<b>h Total. Add lines 1a-1f . . . . .</b>					
<b>Program Service Revenue</b>		<b>Business Code</b>			
	2a				
	b				
	c				
	d				
	e				
	f All other program service revenue . . . . .				
<b>g Total. Add lines 2a-2f . . . . .</b>					
3 Investment income (including dividends, interest, and other similar amounts) . . . . .		100,695.			100,695.
4 Income from investment of tax-exempt bond proceeds . . . . .					
5 Royalties . . . . .					
6a Gross rents . . . . .	(i) Real	(ii) Personal			
b Less: rental expenses . . . . .					
c Rental income or (loss) . . . . .					
d Net rental income or (loss) . . . . .					
7a Gross amount from sales of assets other than inventory . . . . .	(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses . . . . .	758,392				
c Gain or (loss) . . . . .	696,981				
d Net gain or (loss) . . . . .	61,411		61,411.	61,411.	
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a				
b Less: direct expenses . . . . .	b				
c Net income or (loss) from fundraising events . . . . .					
9a Gross income from gaming activities. See Part IV, line 19 . . . . .	a				
b Less: direct expenses . . . . .	b				
c Net income or (loss) from gaming activities . . . . .					
10a Gross sales of inventory, less returns and allowances . . . . .	a				
b Less: cost of goods sold . . . . .	b				
c Net income or (loss) from sales of inventory . . . . .					
<b>Miscellaneous Revenue</b>	<b>Business Code</b>				
11a					
b					
c					
d All other revenue . . . . .					
e Total. Add lines 11a-11d . . . . .		162,106.	61,411.		100,695.
<b>12 Total revenue. See instructions . . . . .</b>					

**Part IX Statement of Functional Expenses**

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

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

<b><i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i></b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 . . . . .	72,000.	72,000.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . .				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16. . . . .				
4 Benefits paid to or for members . . . . .				
5 Compensation of current officers, directors, trustees, and key employees . . . . .				
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 . . . . .				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .				
9 Other employee benefits . . . . .				
10 Payroll taxes . . . . .				
11 Fees for services (non-employees):				
a Management . . . . .				
b Legal . . . . .				
c Accounting . . . . .	1,206.	1,206.		
d Lobbying . . . . .				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees . . . . .	22,755.	22,755.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .	1,772.	1,772.		
12 Advertising and promotion . . . . .				
13 Office expenses . . . . .				
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .				
17 Travel . . . . .				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings . . . . .				
20 Interest . . . . .				
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .				
23 Insurance . . . . .				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	97,733.	72,000.	25,733.	NONE
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

## Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing . . . . .		1	
	2 Savings and temporary cash investments . . . . .	272,250.	2	280,546.
	3 Pledges and grants receivable, net . . . . .		3	
	4 Accounts receivable, net . . . . .		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .		6	
	7 Notes and loans receivable, net . . . . .		7	
	8 Inventories for sale or use . . . . .		8	
	9 Prepaid expenses and deferred charges . . . . .		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a		
	b Less: accumulated depreciation . . . . .	10b		10c
	11 Investments - publicly traded securities . . . . .	2,520,954.	11	2,577,031.
	12 Investments - other securities. See Part IV, line 11 . . . . .		12	
	13 Investments - program-related. See Part IV, line 11 . . . . .		13	
	14 Intangible assets . . . . .		14	
	15 Other assets. See Part IV, line 11 . . . . .		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . .	2,793,204.	16	2,857,577.
Liabilities	17 Accounts payable and accrued expenses . . . . .		17	
	18 Grants payable . . . . .		18	
	19 Deferred revenue . . . . .		19	
	20 Tax-exempt bond liabilities . . . . .		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		22	
	23 Secured mortgages and notes payable to unrelated third parties . . . . .		23	
	24 Unsecured notes and loans payable to unrelated third parties . . . . .		24	
	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 . . . . .		25	
	26 Total liabilities. Add lines 17 through 25 . . . . .		NONE	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. . . . .			
	27 Unrestricted net assets . . . . .		27	
	28 Temporarily restricted net assets . . . . .		28	
	29 Permanently restricted net assets . . . . .		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 30 through 34. . . . .			
	30 Capital stock or trust principal, or current funds . . . . .		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31	
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .	2,793,204.	32	2,857,577.
	33 Total net assets or fund balances . . . . .	2,793,204.	33	2,857,577.
	34 Total liabilities and net assets/fund balances . . . . .	2,793,204.	34	2,857,577.

Form 990 (2012)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI . . . . . 

1 Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	162,106.
2 Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	97,733.
3 Revenue less expenses. Subtract line 2 from line 1 . . . . .	3	64,373.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	2,793,204.
5 Net unrealized gains (losses) on investments . . . . .	5	
6 Donated services and use of facilities . . . . .	6	
7 Investment expenses . . . . .	7	
8 Prior period adjustments . . . . .	8	
9 Other changes in net assets or fund balances (explain in Schedule O) . . . . .	9	
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) . . . . .	10	2,857,577.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII . . . . . 

1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis

2b Were the organization's financial statements audited by an independent accountant? . . . . .  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis

2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .

3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a	X	
2b	X	
2c		
3a	X	
3b		

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

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

OMB No 1545-0047

**2012**

Open to Public  
Inspection

Name of the organization

SOCIETY FOR PROMOTING THEOLOGICAL EDUCATION

Employer identification number

04-6092557

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

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

1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  
 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  
 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  
 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_  
 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)  
 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  
 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  
 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  
 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  
 a  Type I    b  Type II    c  Type III-Functionally integrated    d  Type III-Non-functionally integrated  
 e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box. . . . .  
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . .  
 (ii) A family member of a person described in (i) above? . . . . .  
 (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . .  
 h Provide the following information about the supported organization(s).

	Yes	No
11g(i)	X	
11g(ii)	X	
11g(iii)	X	

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

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

Schedule A (Form 990 or 990-EZ) 2012

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
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 . . . . .						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . . . .						
6 Public support. Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4 . . . . .						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
11 Total support. Add lines 7 through 10 . . . . .						
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	
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 2012 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	%
15 Public support percentage from 2011 Schedule A, Part II, line 14 . . . . .	15	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ► <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"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

N/A

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 IV) . . . . .						
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 . . . . . ► <input type="checkbox"/>						

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

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

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

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

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

    b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

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

SCHEDULE A, PART I (h) - INFORMATION ABOUT SUPPORTED ORGANIZATIONS

=====

NAME OF SUPPORTED ORGANIZATION:

HARVARD DIVINITY SCHOOL

TYPE OF ORGANIZATION FROM PART I: 13

IS THE ORGANIZATION LISTED IN GOVERNING DOCUMENT?: YES

DID YOU NOTIFY THE ORGANIZATION OF YOUR SUPPORT?: YES

IS THE ORGANIZATION ORGANIZED IN THE U.S.? : YES

TOTAL SUPPORT:

NONE

=====

**SCHEDULE I**  
(Form 990)**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**Department of the Treasury  
Internal Revenue Service  
Name of the organization

Name of the organization

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

Name of the organization

**SOCIETY FOR PROMOTING THEOLOGICAL EDUCATION****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 Governments and Organizations in the United States** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(g) Description of non-cash assistance	(h) Purpose of grant or assistance
						(f1)	(f2)		
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									

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

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

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

Schedule I (Form 990) (2012)

JSA

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

Boat III can be duplicated if additional storage is needed.

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

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

N/A EXPLANATION FOR FORM 990: SCHEDULE I: PART 1, LINE 2

- 4 -

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

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.  
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

**2012**

Open To Public  
Inspection

Name of the organization

**SOCIETY FOR PROMOTING THEOLOGICAL EDUCATION**

Employer identification number

04-6092557

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

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

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year

under section 4958 . . . . . ► \$ \_\_\_\_\_

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

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

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

Total . . . . . ► \$ \_\_\_\_\_

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

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

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

Schedule L (Form 990 or 990-EZ) 2012

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

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SEE STATEMENT 1					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part V Supplemental Information**

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

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

Department of the Treasury  
Internal Revenue Service

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

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2012**

**Open to Public  
Inspection**

Name of the organization

SOCIETY FOR PROMOTING THEOLOGICAL EDUCATION

Employer identification number

04-6092557

THE TAX RETURN IS PRESENTED TO THE TREASURER WHO THEN REVIEWS AND  
SIGNS THE TAX RETURN.

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 6

THE ORGANIZATION HAS MEMBERS

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 7a

THE ORGANIZATION HAS MEMBERS WITH THE POWER TO ELECT THE GOVERNING  
BODY

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 8a

EACH MEETING IS DOCUMENTED WITH WRITTEN MINUTES

FORM 990, PAGE 6, PART VI, LINE 11-DESCRIPTION OF PROCESS FOR REVIEW

THE TAX RETURN IS PRESENTED TO THE TREASURER WHO THE REVIEWS AND SIGNS  
THE TAX RETURN.

DESCRIPTION FOR MAKING DOCUMENTS PUBLIC

FORM 990, PAGE 6, PART VI, LINE 19

AVAILABLE UPON REQUEST

• SOCIETY FOR PROMOTING THEOLOGICAL EDUCATION

04-6092557

SCH L, PART IV - BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS

=====

NAME OF INTERESTED PERSON:

SILVER BRIDGE ADVISORS LLC

RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION

MICHAEL FAY WAS A PARTNER OF WCPH WHICH SBA WAS A SUBSIDIARY

DESCRIPTION OF TRANSACTION:

INVESTMENT FEES

SHARING OF ORGANIZATION'S REVENUES ..... NO

STATEMENT 1

# Silver Bridge\*

## Investment Detail

23205010814 | SOCIETY PROMOTING THEOLOGICAL EDUC

24-Jun-2013 11:28 AM ET

**Asset Types:** Cash, Cash Equivalents, Domestic Equity, Fixed Income, International Equity, International Fixed Income, Other

**Data Current as of:** 31-Mar-2013

### SUMMARY

Asset Type	Market Value	Total Cost
Cash	\$113,028.83	\$113,028.83
Domestic Equity	\$472,166.28	\$391,925.32
Fixed Income	\$1,068,550.65	\$970,772.38
International Equity	\$689,206.84	\$551,945.65
International Fixed Income	\$142,372.23	\$141,358.00
<b>Totals</b>	<b>\$2,485,324.83</b>	<b>\$2,169,030.18</b>

### DETAIL

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
<b>Cash</b>					
CASH - INCOME	-	13,439.9200	1 0000	\$13,439.92	\$13,439.92
CASH - INVESTED INCOME	-	(13,439.9200)	1.0000	(\$13,439.92)	(\$13,439.92)
DREYFUS INS CASH ADVANTAGE I Ticker DADXX   Asset ID 26200V104	26200V104 DADXX	99,588.9100	100 0000%	\$99,588.91	\$99,588.91
DREYFUS INS CASH ADVANTAGE I Ticker DADXX   Asset ID 26200V104	26200V104 DADXX	13,439.9200	100 0000%	\$13,439.92	\$13,439.92
<b>Subtotal</b>				<b>\$113,028.83</b>	<b>\$113,028.83</b>
<b>Domestic Equity</b>					
ALGER SMIDCAP GROWTH I Ticker ASIMX   Asset ID 015565468	015565468 ASIMX	3,622.1670	18 4300	\$66,756.54	\$46,666.72
ASTON TAMRO SMALL CAP FUND I Ticker ATSX   Asset ID 00078H141	00078H141 ATSX	3,103.4660	22.1800	\$68,834.88	\$60,883.83
DIAMOND HILL LONG/SHORT-I Ticker DHLSX   Asset ID 25264S833	25264S833 DHLSX	5,294.3960	19 9400	\$105,570.26	\$93,600.00

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
ISHARES DJ SELECT DIVIDEND Ticker DVY   Asset ID 464287168	464287168 DVY	1,480 0000	63 4000	\$93,832.00	\$85,187.71
THIRD AVENUE REAL ESTATE VAL Ticker:TAREX   Asset ID 884116401	884116401 TAREX	1,982.7870	26 4500	\$52,444.72	\$42,974.12
WALTHAUSEN SMALL CAP VALUE Ticker:WSCVX   Asset ID:933310104	933310104 WSCVX	4,048.1550	20.9300	\$84,727.88	\$62,612.94
<b>Subtotal</b>				<b>\$472,166.28</b>	<b>\$391,925.32</b>
<b>Fixed Income</b>					
BANK OF AMERICA 5.125% 11/15/14 Asset ID:060505AU8	060505AU8	50,000.0000	106.3540%	\$53,177.00	\$48,690 00
BLACKROCK STRATEGIC INCOME OPP FD-IN Ticker:BSIIX   Asset ID.09256H286	09256H286 BSIIX	7,763.8920	10 1400	\$78,725.86	\$74,999.20
CATERPILLAR INC 5 700% 8/15/16 Asset ID:149123BM2	149123BM2	50,000 0000	115 6860%	\$57,843.00	\$50,162.50
COMCAST CORP 5 875% 2/15/18 Asset ID 20030NAR2	20030NAR2	50,000 0000	120 6400%	\$60,320.00	\$51,952.00
FHLB 4.750% 12/12/14 Asset ID 3133XN5L9	3133XN5L9	80,000.0000	107 4290%	\$85,943 20	\$81,476 80
FNMA 4 375% 10/15/15 Asset ID.31359MZC0	31359MZC0	100,000.0000	110 0420%	\$110,042.00	\$108,915.80
GOLDMAN SACHS 5 125% 1/15/15 Asset ID 38141GEA8	38141GEA8	50,000 0000	106 8370%	\$53,418.50	\$47,776.50
ILLINOIS ST 4 422% 4/01/15 Asset ID:452152FF3	452152FF3	50,000.0000	106 2310%	\$53,115.50	\$50,369.66
JP MORGAN CHASE 6 000% 1/15/18 Asset ID 46625HGY0	46625HGY0	50,000 0000	118.8350%	\$59,417.50	\$48,552 00
LORILLARD TOBACCO CO 6 875% 5/01/20 Asset ID 544152AB7	544152AB7	50,000.0000	121.2800%	\$60,640.00	\$51,323.91

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
MORGAN STANLEY 5.375% 10/15/15 Asset ID:61746SBR9	61746SBR9	50,000 0000	109.2150%	\$54,607.50	\$45,641.50
ORACLE CORP 5.250% 1/15/16 Asset ID 68402LAC8	68402LAC8	50,000.0000	112.4770%	\$56,238.50	\$48,633.50
PEGTF ABS 6.61% 6/15/15 Ticker:PGT6615   Asset ID:69361YAF0	69361YAF0 PGT6615	10,850.4300	101.3470%	\$10,996.59	\$11,511.63
SIMON PROP GP LP 4.200% 2/01/15 Asset ID 828807CC9	828807CC9	50,000.0000	105.4890%	\$52,744.50	\$51,525.19
U.S. TREASURY NOTES 4.250% 11/15/14 Asset ID:912828DC1	912828DC1	100,000.0000	106.5080%	\$106,508.00	\$99,316.41
U.S. TREASURY NOTES 4.625% 11/15/16 Asset ID:912828FY1	912828FY1	100,000.0000	114.8130%	\$114,813.00	\$99,925.78
<b>Subtotal</b>				<b>\$1,068,550.65</b>	<b>\$970,772.38</b>
<b>International Equity</b>					
AQR RISK PARITY FUND-I Ticker:QRIX   Asset ID 00203H826	00203H826 QRIX	8,188.7800	12.0300	\$98,511.02	\$90,768.26
ARTISAN INTL VALUE FUND-INV Ticker ARTKX   Asset ID 04314H881	04314H881 ARTKX	5,854 9930	32.6700	\$191,282.62	\$145,847.88
HARBOR INTERNATIONAL GRO-INS Ticker HAIGX   Asset ID 411511801	411511801 HAIGX	15,822 5190	12.1300	\$191,927.16	\$139,660.00
HARDING LOEVNER EMERGING MARKETS Ticker:HLEMX   Asset ID 412295305	412295305 HLEMX	3,431 2340	48.1600	\$165,248.23	\$145,541.16
MATTHEWS PACIFIC TIGER FD-IS Ticker:MPITX   Asset ID:577130834	577130834 MPITX	1,683 4520	25.0900	\$42,237.81	\$30,128.35
<b>Subtotal</b>				<b>\$689,206.84</b>	<b>\$551,945.65</b>
<b>International Fixed Income</b>					
EATON VANCE FLTG RATE ADV	277923637 EIFAX	12,677.8480	11.2300	\$142,372.23	\$141,358.00

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
FUND CL I Ticker:EIFAX   Asset ID:277923637					
<b>Subtotal</b>				<b>\$142,372.23</b>	<b>\$141,358.00</b>

## Silver Bridge

## Investment Detail

23205010814E | SOC. PROMOTING THEOLOGICAL EDUC LCE

24-Jun-2013 11:55 AM ET

**Asset Types:** Cash, Cash Equivalents, Domestic Equity, Fixed Income, International Equity, International Fixed Income, Other

**Data Current as of:** 31-Mar-2013

**SUMMARY**

Asset Type	Market Value	Total Cost
Cash	\$34,161.79	\$34,161.79
Domestic Equity	\$725,883.04	\$501,092.33
International Equity	\$30,217.68	\$19,937.38
<b>Totals</b>	<b>\$790,262.51</b>	<b>\$555,191.50</b>

**DETAIL**

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
<b>Cash</b>					
CASH - INCOME	-	1,944.4000	1.0000	\$1,944.40	\$1,944.40
CASH - INVESTED INCOME	-	(1,915.8000)	1.0000	(\$1,915.80)	(\$1,915.80)
DREYFUS INS CASH ADVANTAGE I Ticker:DADXX I Asset ID:26200V104	26200V104 DADXX	32,217.3900	100.0000%	\$32,217.39	\$32,217.39
DREYFUS INS CASH ADVANTAGE I Ticker:DADXX I Asset ID:26200V104	26200V104 DADXX	1,915.8000	100.0000%	\$1,915.80	\$1,915.80
<b>Subtotal</b>				<b>\$34,161.79</b>	<b>\$34,161.79</b>
<b>Domestic Equity</b>					
ABBOTT LABS Ticker ABT   Asset ID.002824100	002824100 ABT	263 0000	35 3200	\$9,289.16	\$6,235.38
ABBVIE INC Ticker.ABBV   Asset ID.00287Y109	00287Y109 ABBV	263.0000	40 7800	\$10,725.14	\$6,761.72
AFLAC INC Ticker:AFL   Asset ID.001055102	001055102 AFL	519 0000	52 0200	\$26,998.38	\$18,982.84
AMAZON.COM INC Ticker.AMZN   Asset ID.023135106	023135106 AMZN	75.0000	266.4900	\$19,986.75	\$11,836.10
AMERICAN INTERNATIONAL GROUP Ticker:AIG   Asset ID.026874784	026874784 AIG	295.0000	38 8200	\$11,451.90	\$11,278.45
AMERIPRIZE FINANCIAL INC Ticker.AMP   Asset ID.03076C106	03076C106 AMP	315.0000	73 6500	\$23,199.75	\$18,271.62

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
AMGEN INC Ticker AMGN   Asset ID 031162100	031162100 AMGN	178 0000	102.5100	\$18,246.78	\$9,212.24
APPLE INC Ticker AAPL   Asset ID:037833100	037833100 AAPL	52.0000	442.6600	\$23,018.32	\$6,421.23
BAKER HUGHES INC Ticker:BHI   Asset ID:057224107	057224107 BHI	332.0000	46.4100	\$15,408.12	\$14,519.50
BAXTER INTL INC Ticker:BAX   Asset ID:071813109	071813109 BAX	115.0000	72.6400	\$8,353.60	\$5,939.92
BROADCOM CORP Ticker:BRCM   Asset ID.111320107	111320107 BRCM	475 0000	34.6790	\$16,472.53	\$16,048.62
CELGENE CORP Ticker CELG   Asset ID:151020104	151020104 CELG	112 0000	115.9100	\$12,981.92	\$5,385.10
CHESAPEAKE ENERGY CORP Ticker:CHK   Asset ID:165167107	165167107 CHK	360.0000	20.4100	\$7,347.60	\$6,647.29
CHEVRON CORPORATION Ticker:CVX   Asset ID:166764100	166764100 CVX	127.0000	118.8200	\$15,090.14	\$8,065.98
COACH INC Ticker:COH   Asset ID:189754104	189754104 COH	230.0000	49.9900	\$11,497.70	\$11,343.62
COLGATE PALMOLIVE CO Ticker:CL   Asset ID:194162103	194162103 CL	143.0000	118.0300	\$16,878.29	\$12,137.53
COMCAST CORP-CL A Ticker CMCSA   Asset ID 20030N101	20030N101 CMCSA	303.0000	41.9800	\$12,719.94	\$4,366.23
CONCHO RESOURCES Ticker CXO   Asset ID.20605P101	20605P101 CXO	180.0000	97.4300	\$17,537.40	\$17,045.19
DISCOVERY COMMUNICATIONS CL A Ticker DISCA   Asset ID 25470F104	25470F104 DISCA	206.0000	78.7400	\$16,220.44	\$8,533.46
EMERSON ELEC CO Ticker EMR   Asset ID:291011104	291011104 EMR	209.0000	55.8700	\$11,676.83	\$6,948.63
ENERGIZER HLDGS INC Ticker. ENR   Asset ID:29266R108	29266R108 ENR	180.0000	99.7300	\$17,951.40	\$13,244.85
EXXON MOBIL CORPORATION Ticker XOM   Asset ID:30231G102	30231G102 XOM	134 0000	90.1100	\$12,074.74	\$5,477.63
FEDEX CORPORATION Ticker:FDX   Asset ID 31428X106	31428X106 FDX	119.0000	98.2000	\$11,685.80	\$10,301.32
GENERAL ELECTRIC CORP Ticker. GE   Asset ID 369604103	369604103 GE	805.0000	23.1200	\$18,611.60	\$5,189.48

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
GOOGLE INC-CL A Ticker:GOOG   Asset ID:38259P508	38259P508 GOOG	12 0000	794.1880	\$9,530.26	\$7,210.99
HOLOGIC INC Ticker HOLX   Asset ID:436440101	436440101 HOLX	842.0000	22.6000	\$19,029.20	\$12,829.06
HONEYWELL INTERNATIONAL INC Ticker HON   Asset ID:438516106	438516106 HON	262 0000	75.3500	\$19,741.70	\$13,354.17
INTEL CORP Ticker INTC   Asset ID:458140100	458140100 INTC	630.0000	21.8350	\$13,756.05	\$13,802.00
INTERNATIONAL BUSINESS MACHINES CORP Ticker IBM   Asset ID:459200101	459200101 IBM	87.0000	213.3000	\$18,557.10	\$7,190.62
JP MORGAN CHASE & CO Ticker JPM   Asset ID:46625H100	46625H100 JPM	337.0000	47.4600	\$15,994.02	\$14,512.97
KROGER CO Ticker KR   Asset ID:501044101	501044101 KR	758.0000	33.1400	\$25,120.12	\$17,990.57
MCDONALDS CORP Ticker MCD   Asset ID:580135101	580135101 MCD	204.0000	99.6900	\$20,336.76	\$12,622.96
MICROSOFT CORP Ticker MSFT   Asset ID:594918104	594918104 MSFT	887.0000	28.6050	\$25,372.64	\$21,309.84
NATIONAL- OILWELL INC Ticker NOV   Asset ID:637071101	637071101 NOV	220.0000	70.7500	\$15,565.00	\$15,730.93
PROCTER & GAMBLE CO Ticker PG   Asset ID:742718109	742718109 PG	208.0000	77.0600	\$16,028.48	\$8,885.02
QUALCOMM INC Ticker QCOM   Asset ID:747525103	747525103 QCOM	332.0000	66.9400	\$22,224.08	\$14,364.84
SKYWORKS SOLUTIONS INC Ticker SWKS   Asset ID:83088M102	83088M102 SWKS	782.0000	22.0250	\$17,223.55	\$16,389.95
TARGET CORP Ticker TGT   Asset ID:87612E106	87612E106 TGT	269.0000	68.4500	\$18,413.05	\$13,171.41
THE MOSAIC COMPANY Ticker MOS   Asset ID:61945C103	61945C103 MOS	192.0000	59.6100	\$11,445.12	\$9,935.87
UNITED TECHNOLOGIES CORP Ticker UTX   Asset ID:913017109	913017109 UTX	145 0000	93.4300	\$13,547.35	\$5,344.77
US BANCORP NEW Ticker:USB   Asset ID:902973304	902973304 USB	576.0000	33.9300	\$19,543.68	\$14,912.65
VERIZON COMMUNICATIONS	92343V104 VZ	441.0000	49.1500	\$21,675.15	\$13,033.16

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
Ticker:VZ   Asset ID 92343V104					
WELLS FARGO & CO Ticker:WFC   Asset ID:949746101	949746101 WFC	414.0000	36.9900	\$15,313.86	\$9,868.05
YUM! BRANDS INC Ticker YUM   Asset ID:988498101	988498101 YUM	114.0000	71.9400	\$8,201.16	\$7,394.35
ZIMMER HLDGS INC Ticker:ZMH   Asset ID 98956P102	98956P102 ZMH	184.0000	75.2200	\$13,840.48	\$11,044.22
<b>Subtotal</b>				<b>\$725,883.04</b>	<b>\$501,092.33</b>
<b>International Equity</b>					
DIAGEO PLC SPONS ADR Ticker:DEO   Asset ID:25243Q205	25243Q205 DEO	149.0000	125.8400	\$18,750.16	\$11,303.21
TEVA PHARMACEUTICAL INDs LTD ADR Ticker:TEVA   Asset ID:881624209	881624209 TEVA	289 0000	39.6800	\$11,467.52	\$8,634.17
<b>Subtotal</b>				<b>\$30,217.68</b>	<b>\$19,937.38</b>

# Silver Bridge\*

## Investment Detail

23205010823 | SOCIETY PROMOTING THEOLOGY ED-INV INC

24-Jun-2013 11:27 AM ET

**Asset Types:** Cash, Cash Equivalents, Domestic Equity, Fixed Income, International Equity, International Fixed Income, Other

**Data Current as of:** 31-Mar-2013

### SUMMARY

Asset Type	Market Value	Total Cost
Cash	\$133,355.45	\$133,355.45
<b>Totals</b>	<b>\$133,355.45</b>	<b>\$133,355.45</b>

### DETAIL

Asset Name	CUSIP Ticker	Quantity	Current Price	Market Value	Total Cost
<b>Cash</b>					
CASH - INCOME	-	127,475.3100	1.0000	\$127,475.31	\$127,475.31
	-				
CASH - INVESTED INCOME	-	(127,475.3100)	1.0000	(\$127,475.31)	(\$127,475.31)
DREYFUS INS CASH ADVANTAGE I Ticker DADXX   Asset ID 26200V104	26200V104 DADXX	5,880.1400	100.0000%	\$5,880.14	\$5,880.14
DREYFUS INS CASH ADVANTAGE I Ticker DADXX   Asset ID 26200V104	26200V104 DADXX	127,475.3100	100.0000%	\$127,475.31	\$127,475.31
<b>Subtotal</b>				<b>\$133,355.45</b>	<b>\$133,355.45</b>