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)

▶ 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.

OMB No. 1545-0047

2019

Open to Public Inspection

A	For the	2019 calendar y	ear, or tax year beginning		09-01	, 2019, and	l ending	0:	8-31 , 20 20				
В	Check if a	applicable;	C Name of organizationSHARI	NG LIFE COMMUNITY	OUTREACH	INC		D Empl	loyer identification number				
	Address o	change	Doing business as						75-2831756				
П	Name cha	ande	Number and street (or P.O. box	if mail is not delivered to street addr	ess)	R	pom/suite	F Telen	hone number				
Ī	Initial retu	_	8544 E EMPORIUM C		,			_ (0.0)	(972)285-5819				
П		ım/terminated		country, and ZIP or foreign postal co	do			G Gross receipts					
Ħ	Amended		MESQUITE, TX 7515	•	de				•				
H			Compression of the Compression o		**************************************			S	30,188,441				
LJ	Approanc	on pending	· ·	officer: TERESA JACKSON	ł			•	for subordinates? Yes No				
			SAME AS C ABOVE						es included? Yes No				
1	Tax-exem			(insert no.) 4947(a)(1) or	<u>527</u>				st. (see instructions)				
	Website:		HARINGLIFEOUTREACH	7777	·		H(c) Group	exemption	n number				
		organization: 🗵 Cor	poration Trust Associatio	n Other	L Year	r of formation:	1999 M	State of leg	gat domicite: TX				
	art I	Summary											
	1	Briefly describe to	he organization's mission or	most significant activities:	SHARING	LIFE E	EXISTS TO D	EMONS	TRATE COMPASSION				
ø		BY EFFECTIVELY AND EFFICIENTLY PROVIDING DIGNIFIED, BENEVOLENT SERVICES TO PEOPLE IN NEED											
Governance		LIVING IN MESQUITE, TEXAS AND SOUTHEAST DALLAS COUNTY, TEXAS.											
Ę		TTVITAL AMARIAN											
ŏ	2	Check this box	If the organization disc	ontinued its operations or dis	posed of more	e than 25%	of its net assets.						
න ග	3	Number of voting	members of the governing	body (Part VI, line 1a)				. 3	13				
ŝ	4	Number of indep	endent voting members of th	ie governing body (Part VI, li	ne 1b) •			. 4	1.3				
ij	5	Total number of i	ndividuals employed in caler	ndar year 2019 (Part V. line 2	(a) · ·			. 5	23				
Activities	6	Total number of v	olunteers (estimate if neces	sarv)				. 6	1,945				
Ă	7a		usiness revenue from Part V	••				. 7a	0				
	į		siness taxable income from					7b	0				
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	antoo taxable moonie morni		~	1		1.5					
	8	Contributions and	d grants (Part VIII, line 1h)			ŀ	Prior Year	~~~	Current Year				
Revenue	1		revenue (Part VIII, line 2g)			-	10,928		29,589,856				
	40	-				ŀ	215	,112	583,799				
e Ve	10		ne (Part VIII, column (A), line	· ·		ŀ			0				
œ	i		Part VIII, column (A), lines 5,	· ·				,754	1,979				
**********	12	***************************************	dd lines 8 through 11 (must o		ne 12) .	• • • • •	11,146		30,175,634				
	13		ar amounts paid (Part IX, col	9,991	,391	28,092,075							
	14	Benefits paid to o		0									
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							762,127				
Expenses	16a	Professional fund	traising fees (Part IX, columi	n (A), line 11e) - · · · ·		[0				
bei	b	Total fundraising	expenses (Part IX, column (D), line 25) 🕨	164	,246							
Ж	17	Other expenses	(Part IX, column (A), lines 11	a-11d, 11f-24e)			244	,924	243,486				
	18	Total expenses.	Add lines 13-17 (must equal	Part IX, column (A), line 25)	* * * * *	<u>.</u> [10,857	,350	29,097,688				
	19	Revenue less ex	penses. Subtract line 18 fro	m line 12		[,753	1,077,946				
5	8			***************************************	***************************************		Beginning of Curre		End of Year				
ets	E 20	Total assets (Par	t X, line 16)			<u> </u>	1,449		2,628,499				
A S	21	Total liabilities (Pa	•					,574	169,252				
Net Assets or	Ĕ 22	•	d balances. Subtract line 21	from line 20			1,381	***************************************	2,459,247				
Pa	irt II	Signature					2,302	7501	2,400,241				
Unc	ier penalti	es of perjury, I declare t	hat I have examined this return, inclu	ding accompanying schedules and	statements, and to	the best of my	knowledge and belie	f, it is					
true	, correct, a	and complete. Declarati	ion of preparer (other than officer) is	based on all information of which pre	eparer has any kno	owledge.			**************************************				
		A TEDESA	JACKSON					}					
Sig	ın	Signature of c	······································					Dal	le				
He	re	[.		n Arnnemen	/								
		Type or print r		E/DIRECTOR		······································	***************************************						
		Print/Type preparer		arer's signature)	Jr Voad	<i>f</i>		<u> </u>	PTIN				
Pai	d		XI /	ALTIYASH	イしハハ		Check	IJ if					
		Jennifer :		THU U	<u> </u>	01-2021		played	P00236976				
	parer	_	Jenni/fer S		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		Firm's EIN		*****				
US	e Only	Firm's address	105 Saint M	··· • • • • • • • • • • • • • • • • • •	00		Phone no.						
			······································	75 0 87	····			972-	270-5452				
May	the IRS	diecuse this ratur	n with the preparer shown a	(annitrution age) Cayon					Y Voe No				

***********	rt III Statement of Program Service Accomplishments								
1.70	Check if Schedule O contains a response or note to any line in this Part III								
1	Briefly describe the organization's mission:								
	SHARING LIFE EXISTS TO DEMONSTRATE COMPASSION BY EFFECTIVELY AND EFFICIENTLY PROVIDING DIGNIFIED,								
	BENEVOLENT SERVICES TO PEOPLE IN NEED LIVING IN MESQUITE, TEXAS AND SOUTHEAST DALLAS COUNTY,								
	TEXAS.								
2	Did the organization undertake any significant program services during the year which were not listed on the								
	prior Form 990 or 990-EZ? · · · · · · · · · · · · · · · · · · ·								
	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?								
,	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.								
	are total expenses, and revenue, if any, to each program service reported.								
4a	(Code:) (Expenses \$ 28,828,540 including grants of \$) (Revenue \$)								
	THROUGH BASIC CLIENT SERVICES, SHARING LIFE PROVIDES EMERGENCY ASSISTANCE, FOOD, CLOTHING AND								
	HOUSEHOLD ITEMS. THESE SERVICES ARE PROVIDED THROUGH A FOOD PANTRY, CLOTHES CLOSET, AND RESOURCE								
	CENTER. SHARING LIFE DISTRIBUTES FOOD TO OTHER PANTRIES THROUGH THE PILOT NORTH TEXAS FOOD BANK								
	HUB LOCATION LOCATED AT SHARING LIFE. THE FINANCIAL EMPOWERMENT CENTER OFFERS WORKFORCE								
	DEVELOPMENT TRAINING, JOB SKILLS TRAINING, FINANCIAL ASSISTANCE, PLUS FINANCIAL COACHING AND								
	EDUCATION. APPROXIMATELY 3.8 MILLION POUNDS OF FOOD WAS PROVIDED BY SHARING LIFE. SHARING LIFE								
	ASSISTED APPROXIMATELY 2,645 CLIENTS THROUGH IT'S BACK TO SCHOOL, CHRISTMAS FAIRE AND SUMMER								
	LUNCH PROGRAMS. 53 CLIENTS RECEIVED SERVICES THROUGH THE FINANCIAL EMPOWERMENT CENTER AND 274								
	CLIENTS ATTENDED FINANCIAL LITERACY CLASSES.								
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)								
	THE ORGANIZATION RECEIVES RESTRICTED GRANT FUNDS FROM ATMOS AND TXU ENERGY AID IN ORDER TO PROVIDE UTILITY ASSISTANCE TO ITS CLIENTS THROUGH THE CLIENT ASSISTANCE PROGRAM. THE ORGANIZATION								
	ASSISTED APPROXIMATELY 1,460 CLIENTS WITH UTILITIES.								
	THE STATE OF THE S								
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)								
4d	Other program services (Describe on Schedule O.)								
	(Expenses \$ including grants of \$) (Revenue \$)								
40	Total program service expenses > 28,828,540								

EEA

9) SHARING LIFE COMMUNITY OUTREACH INC Checklist of Required Schedules Part IV

			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	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
,	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
6	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
v	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 "Yes," complete Schedule D, Part I	6		**
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	- 6		X
,	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			Х
•	complete Schedule D, Part III	8		109
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			<u> </u>
•	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 donor-restricted endowments	Ť		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	200/0000000000000000000000000000000000	49656949654	SERVICE SALE
	complete Schedule D, Part VI	11a	х	
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		х
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
Ċ	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	х	
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		<u> </u>
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	• • • • • • • • • • • • • • • • • • • •			
	"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		<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>x</u>
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			
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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? If "Yes," complete Schedule F. Parts II and IV	45		
16		15		<u>x</u>
ıu	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? If "Yes," complete Schedule F, Parts III and IV	46		
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		_X
+1	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		77
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1 /		<u>x</u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	w	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	,,,	Х	
	If "Yes," complete Schedule G, Part III	19		¥
20 a		20a		X X
b		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? If "Yes," complete Schedule I, Parts I and II	21		х

9) SHARING LIFE COMMUNITY OUTREACH INC Checklist of Required Schedules (continued) Part IV

Fait M, Cabami (A), the 27 if "Yes," complete Schedule J. Parts I and III Did the organization sourcest and former officers, directors, fusites, key employees, and highest componented engagination's current and former officers, directors, fusites, key employees, and highest componented engagination's current and former officers, directors, fusites, key employees, and highest componented engagination's current and former officers, directors, fusites, key employees, and highest componented engagination's current and former officers, directors, and the state of the search			~-·········	Yes	No
23 Def the coganization answer "Nat" to Part VII, Section A, Inc. 3, A, or 5 about compensation of the organization store or to cheer, directors, nustaes, key employees, and highrest componated employees // Vies." complete Schedule / 244 244 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the least day of the year. That was issued after December 37, 2002? If "Yes." amover time 24b proxys? 24d and complete Schedule K. If "No. 5g to line 25a" 244 244 X 245 Did the organization invest any proceeds of tax-exempts bonds beyond a temporary period exception? 24d of Line organization invest any proceeds of tax-exempts bonds beyond a temporary period exception? 24d of Line organization invest any proceeds of tax-exempts bonds of Store (15 and 15 and	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
arganization's current and former officers, directors, five letes, key employees, and highest componented analysises? If was a law cerent hond 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," enwere fives 246 from \$100,000 as of the last day of the year that was issued after December 31, 2002? If "Yes," enwere fives 246 from \$2.50 bit the organization invest any proceeds of tiss exempt honds beyond a temporary period exception? Did the organization maintain are secrew account other than a relationing execut with any time during the year? Did the organization are secrew account other than a relationing execut with any time during the year? 246 bit the organization and as any time during the year? 257 bit the organization and the process of the given that a relationing execut with any time during the year? 258 Section 801(c)(5), 901(c)(4), and 901(c)(2) organizations. Both the organization regage in an excess benefit treascation with a discussified person in a prior year, and that the irranaction has not bean reported on any of the organizations prior 980 or 980(c)(2) organization report any an amount on Part X, time 5 or 22, for receivables from or payables to any current or former officer, director, fluster, key employee, creater or founder, substantial contributor, or 35% controlled exting of emily member or any of these persons? If Yes, "complete Schedule L, Part II and the organization provide a grant or other assistance to any current or former officer, director, fluster, key employee, created or founder, substantial contributor? If yes, complete Schedule L, Part IV and the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, create or flunder, substantial provides and party to a business transaction with or organization report and party to a business transaction with organization payable schedule L, Part IV and the organization report and anyl		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
de entiployeers? If "Ees Complete Schedule J. Sido Did te congratization have a last average tho not sisse with an outstanding principal amount of more than strong 3 4 500 000 as of the last day of the year. Peta was issued after December 31, 2002? If "Yes," enswer lives 2 7 5 by Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? children organization invest any proceeds of tax exempt bonds beyond a temporary period exception? children organization maritania an excrew account sitem than a redunding excrew at any time during the year? do did the organization maritania of the strong the strong of the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? did the organization maritania of the strong of the strong of the organization and the strong of the organization provides and the strong of the organization provides and organization provides and principle Schedule L. Part I are strong or the organization provides and principle strong or the organization provides and entity (including an employee chereof, a grant selection committee provides confliction and principle schedule L. Part II are provided and the organization provides and entity (including an employee thereof or family member of any of these previous? If "Yes," complete Schedule L. Part II are provided and the organization provides and entity (including an employee thereof or family member of any of these provides Schedule L. Part II are provided and the organization organization organization o	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
24a Dit 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 vives insued after December 31, 2002? If "Yes," "answer lines 246 shrough 24d and complete Schedule K. If "No." go Isine 259 Dit the organization invest any proceeds of the Accessing bonds beyond a temporary period exception? 26d Dit the organization market and exercive account forth than a retirently escribed and under the part of the december 31, 2002 If "Yes," "answer lines 246 or 24d or 24					
SECONDO as of the last day of the year, list vas is seed after December 31, 20027 if "ves," "answer insize 24b through 24d and complete Schedule K. If 'Mr. or a bine 25s to the cognization invest any proceeds of the exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of the exempt bonds beyond a temporary period exception? Did the organization invest and and a sean "on behalf of "issuer for bonds outstanding at any time during the year? 24d Did the organization and as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d Section 30 (16), 300 (16), 40 and 501(-)(28) organizations. Did the organization ranges in an excess benefit transaction with a disqualified person during the year? 24d I be the organization and the largegod in an oxess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 500 or 506-E27 in "Yes," "organizations prior Forms 500 or 506-E27 in "Yes," "organizations prior Forms 500 or 506-E27 in "Yes," organization prior Forms 500 or 506-E27 in "Yes," organization prior Forms 500 or 506-E27 in "Yes," organization for the organization prior Forms 500 or 506-E27 in "Yes," organization prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior Forms 500 or 506-E27 in "Yes," organization for prior For			23		Х
by Dick the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Dick the organization matical in an escrow account other than a refunding escrow at any time during the year? d Dick the organization matical in an escrow account other than a refunding escrow at any time during the year? 246 d Dick the organization matical in an escrow account other than a refunding escrow at any time during the year? 246 d Dick the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 247 248 Section 801c(3), 901c(3), 401c(3), 401c(3) organizations, told the organization engage in an excess benefit transaction with o disequilided person in a prior year, and that the transaction has not been reported on any of the organization person in a prior year. And that the transaction has not been reported on any of the organizations person in a prior year. And that the transaction has not been reported on any of the organizations person in a prior year. And that the transaction was not been reported on any of the organizations provide any organization or polythese person in a prior year. And that the transaction was not person and the prior or organization organization and the prior of the prior of the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substandial contributor or employee thereof in grant selection committee members or to a 30% controlled entity friction grant enembers or to a 30% controlled entity frictioning an employee thereof in grant selection committee members or to a 30% controlled entity frictioning an employee thereof in grant selection committee members or to a 30% controlled entity frictioning an employee thereof in grant prior to grant prior to former officer, director, trustee, key employee, creator or funding or fairly in the prior of prior the prior trustee in the prior trustee in the prior trustee in the prior trustee in the prior trus	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
b Old the organization winest any proceeds of lax-exempt bronds beyond a temporary period exception? Did the organization maintain an escrew account ather than a refunding escrew at any time during the year to defease any lax-exempt bronds? 24c Did the organization act as an "'m behalf of "issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "'m behalf of "issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "'m behalf of "issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "'m behalf of "issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "'m behalf of "issuer for bonds outstanding at any time during the year? 25b Did the organization act as an "mount on the part of the organization according to the part of the organization according to the part of the part of the organization according to the part of t		\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
c Did the organization maintains an ascrow account after than arefunding escrow at any time during the year to defease any tax-exempt bonds? 24a Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24b Secretion 991(3)3, 991(9)4, and 991(4)93 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Nes" complete Schedule L. Part 1		through 24d and complete Schedule K. If "No," go to line 25a	24a		х
to defease any tax-exempl bonds? 24d Did the organization and as an fine behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization aware that the graged in an excess benefit transaction with a disqualified person during the year? If **Pes** complete Schedule L, *Part I** Is the organization aware that the regarded 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 organizations prior forms \$90 or \$90-E27* If **Yes** complete Schedule L, *Part I** 25b V **Yes** complete Schedule L, *Part I** 26c 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, unlikely, key prolyone, controlled critity or family member or any of these persons? If **Yes** complete Schedule L, *Part I** 27c 28d Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substandal contributor or employee thereoft, or family member of any of these persons? If *Yes** complete Schedule L, *Part I** 28d Was the organization a party to a business transaction with one of the following parties (see Schedule L, *Part I** V instructions, for application fligh preschedule, according, and exceptions; a A current or former officer, director, trustee, key employee, preador or founder, or substantial contributor? If **Yes** complete Schedule L, *Part I** A family member of any individual described in line 28a? If *Yes** complete Schedule L, *Part I** A family member of any individual described in line 28a? If *Yes** complete Schedule L, *Part I** A family member of any individual described in line 28a? If *Yes** complete Schedule L, *Part I** A family member of any individual described in line 28a? If *Yes** complete Schedule L, *Part I** A family member of any individual described in line 28a? If *Yes** complete Schedule L, *Part I** A family m	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Sectino 19(10)(3), 801(4), 40 501(4)(29) and 501(4)(29) organizations. Did the organization engage in an excess bonefit transaction with a disqualified person with a disqualified person which a disqualified person which a disqualified person in a prior year, and that the transaction has not been reported on any of the organization person in a prior year, and that the transaction has not been reported on any of the organization person 509-E27? If "Yes" complete Schedule I, Part I 25b X 25b 25b X 25c 25b X 25c 25c 25c X 25c 25c 25c 25c X 25c 25c 25c 25c 25c 25c 25c 25c 25c 2	c				
25a Section 501(c)(3), 601(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If Yes, "complete Schedule L. Part I		to defease any tax-exempt bonds?	24¢		
transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I 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 organizations prior Forms 990 or 90-E27 If "Yes," complete Schedule L. Part II Did the organization aware and 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 or any of these persons? If "Yes," complete Schedule L. Part II 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 59% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part II Was the organization a party to a business transaction with one of the following partice (see Schedule L., Part II Vinstructions, for applicable filing thresholds, conditions, and exceptions): A a Asing member of any individual described in line 28s7 If "Yes," complete Schedule L., Part IV A standard of the organization receive more than 25% 00 in non-cash contributions? If "Yes," complete Schedule II, Part IV Vinstructions, for applicable filing thresholds on a fit, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II, Part IV Did the organization receive more than 25% 000 in non-cash contributions? If "Yes," complete Schedule II, Part IV Did the organization sell exchange, dispose of, or transfer more than 25% of its and assets of yes, "complete Schedule II, Part II Did the organization receive more than 55% 000 in non-cash contributions? If "Yes," complete Schedule II, III, III, III, III, III, III, III	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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-E27 If "Yes," complete Schedule L, Part I 25	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I To former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entility of mility member or any of these persons? If "Yes," complete Schedule L, Part II To the different or to a 35% controlled entility of mility member or any of these persons? If "Yes," complete Schedule L, Part II To to a 35% controlled entility of mility member or any of these persons? If "Yes," complete Schedule L, Part II Was 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 (include gain employee thereof), a grant selection committee member, or to a 35% controlled entity (include) and employee thereof), a grant selection committee member, or to a 35% controlled entity of notice of the selection committee member of the selection of the select		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
Bir Ves, "complete Schedule L, Part II 286 X X X X X X X X X	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
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or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II 26		If "Yes," complete Schedule L, Part I	25b		Х
controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grain 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? If "Yes," complete Schedule L, Part III 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 of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X A 15% controlled entity of one or more individual sandro organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X A 15% controlled entity of one or more individuals andro organizations described in lines 28a or 28b? 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 Did the organization includiate, torminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 Did the organization includiate, torminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 Did the organization on though of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part II. 31 Did the organization receive any payment from or engage in any transaction with a controlled entity with the meaning of section 512(b)(13)? "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Did the organization related to any tax-exempt or tax-exempt from ore pagage in any transaction with a controlled entity with the meaning of section 512(b)(13)? "Yes," c	26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
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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? If "Yes," complete Schedule L, Part III		controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		X
member, or lo a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part III 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? If "Yes," complete Schedule L. Part IV 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L. Part IV 28c X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 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 22 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 301.7701-37 If "Yes," complete Schedule R, Part II 32 X 34 Was the organization of organization with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part IV, line 2 35b X 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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 Sch	27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
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N instructions, for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28b X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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 more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 31 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 sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 X 32 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 entated 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 36 Section 501(5)3 organization share a controlled entity within the meaning of section 512(b)(13)? 35a 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 V Iine 2 36b X 38 Section 501(c)(3) organizations complete Schedule R, Part V, line 2 36b X 39 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are requ		persons? If "Yes," complete Schedule L, Part III	27		х
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sel, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-23 If "Yes," complete Schedule R, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-23 If "Yes," complete Schedule R, Part II 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 Jak X 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" to line 35a, did the organizations. Did the organization make any transfers to an exempt non-charitable related organization. So the organization make any transfers to an exempt non-charitable related organization. Complete Schedule R, Part V, line 2 Job tithe organization. So office and provide explanations in Schedule O for Part VI, lines 1 Job tithe organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 1 Job the organization of office office of the IRS Fillings and Tax Compliance Check if Schedule O contain	28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
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b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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 publish organization receive contributions? If "Yes," complete Schedule M 30 publish organization incuidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 Did the organization influidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 publish organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 publish 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 II 31 publish or organization related to any tax-exempt or texable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 publish organization are a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 32 publish organization are ceive 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 33 publish organization organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 34 publish organization complete Schedule R, Part V, line 2 35 publish organization complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations by often any transfers to an exempt non-charitable related organization complete Schedule R, Part V, line 2 35 publish organization complete Schedule R, Part V, line 2 36 Section 501(c)(3) organization complete Schedule R, Part V, line	а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
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"Yes," complete Schedule L, Part IV 28	b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
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Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 10 Yes No 10 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 10 Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable 10 C Did the organization comply with backup withholding rules for reportable payments to vendors and	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable C Did the organization comply with backup withholding rules for reportable payments to vendors and		related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V. Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. Statements Regarding Other IRS Filings and Tax Compliance Check 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		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, fines 11b and			
Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			38	х	
Check if Schedule O contains a response or note to any line in this Part V	Par				
Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable					
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable					No
b Enter the number of Form 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	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and	b				
The state of the s	c				
			1c	x	

Form 990 (2019) SHARING LIFE COMMUNITY OUTREACH INC

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 2	a	23			
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)					
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3а		x
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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		х
b	If "Yes," enter the name of the foreign country					
	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		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		х
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		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or					
	gifts were not tax deductible?			6b		İ
7	Organizations that may receive deductible contributions under section 170(c).				005005	
а	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	· man many	x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	***************************************	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282? · · · · · · · · · · · · · · · · · · ·			7c		х
ď	If "Yes," indicate the number of Forms 8282 filed during the year	d				
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		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require			7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • •			7h		х
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		************
9	Sponsoring organizations maintaining donor advised funds.			840,000,000		5000000
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a	2339999999999	d Seek Chapters
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·	a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ь				
11	Section 501(c)(12) organizations. Enter:		······································	54554	0.000	
а	Gross income from members or shareholders	a l				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	77/57/17/19/58	\$3500000000
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	ь				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		\$16) \$255(A.B.
-	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	ь				
С	Enter the amount of reserves on hand					
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			170		
	excess parachule payment(s) during the year?			15		v
	If "Yes," see instructions and file Form 4720, Schedule N.	• •		.,		X
16				16		
10	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			,0		X
**********	If "Yes," complete Form 4720, Schedule O.			1800		

Part VI

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

Check if Schedule O contains a response or note to any line in this Part VI 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 13 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 in line 1a, above, who are independent 13 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? 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 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 Х 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 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Яa b Each committee with authority to act on behalf of the governing body? 8b Х 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 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 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 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? b 12b X Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 Х 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? The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b Х 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 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? Section C. Disclosure 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 (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 X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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

TERESA JACKSON (972)285-5819, 3544 E EMPORIUM CIRCLE, MESQUITE, TX 75150

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SHARING LIFE COMMUNITY OUTREACH INC

75-2831756

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

See instructions for the order in which to list the persons above.

				((C)					
(A)	(B)	Position (do not check more than one		(D)	(E)	(F)				
Name and title	Average							Reportable	Reportable	Estimated amount
North Strainte	hours					s both an /trustee)		compensation	compensation	of other
	per week							from the	from related	compensation
	(list any	육물	5	0	~	正型	Ţ	organization (W-2/1099-MfSC)	organizations (W-2/1099-MISC)	from the organization and
	hours for related	divid	stilu	Officer	y e₁	plo	Former	(44-2) (039-WIGC)	(17 21 1000 11.100)	related organizations
	organizations	Individual Irustee or director	Institutional trustee		Key employee	/ee	7			
	below	ruste			yee	mpe				
	dotted line)	ř	ilee			Highest compensated employee				
						E.				
(1) BILL ALBRIGHT	1.00							***************************************		
TREASURER		x		х				0	o	0
(2) BRIAN WASHINGTON	1.00									
DIRECTOR		X						0	0	0
(3) KAREN_BROWN	1.00									
CHAIRMAN		х		х				0	0	0
(4) JUDY TRAMMELL	1.00									
DIRECTOR		X						0	0	0
(5) TRACY PANOUSIERIS	1.00		-							
1ST VP BUDGET & FINANCE		X		х				0	0	00
(6) JIM PHAUP	1.00									
DIRECTOR		х						0	0	0
(7) JOE PARIS	1.00									
DIRECTOR		Х						0	0	0
(8) GLENDA LEE	1.00					-				
DIRECTOR		Х						0	0	00
(9) D'VETTA HUGES	1.00									
SECRETARY		X		х				0	0	0
(10)SHINEY DANIEL	1.00					1				
DIRECTOR		Х						0	0	0
(11)DANNY MACK	1.00									
DIRECTOR		Х						0	0	0
(12)FERNANDO_ROJAS	1.00									
DIRECTOR		х						0	0	0
(13)TERESA JACKSON	40.00					į				
EXECUTIVE DIRECTOR				х	х			88,077	0	00
(14)	L									

Page 8

(A) Name and title	(B) Average hours per week	ge box, unless person is officer and a director.						(D) Reportable compensation from the	(E) Reportal compensal from relat	tion ed	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual Irustee or director	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizati (W-2/1099-N		from the organization and related organizations
(15)											***************************************
(16)				1				**************************************			and the second s
(17)				-							
(18)											***************************************
(19)	And where solds some town										
(20)											
(21)										····	· · · · · · · · · · · · · · · · · · ·
(22)											***************************************
(23)											
(24)	***								***************************************		**************************************
(25)											· · · · · · · · · · · · · · · · · · ·
1b Subtotal				• •	• •		•				
c Total from continuation sheets to Part VII, Sect d Total (add lines 1b and 1c)		· · · · · · · · · · · · · · · · · · ·					▶ ore	88,077 than \$100,000 of		0	0
3 Did the organization list any former officer, director, employee on line 1a? If "Yes," complete Schedule J			e, or					ted		y e ,	Yes No
For any individual listed on line 1a, is the sum of re organization and related organizations greater than \$\frac{1}{2}\$	portable com 6150,000? If "	pensat Yes," c	omple	nd ot ete S	her che	comp dule J	ensa for s	ation from the			
 individual	compensation	from a	any u	nrela	ted	organ				* * *	5 x
Section B. Independent Contractors) 5 X
1 Complete this table for your five highest compensation from the apparatus Compensation from the compensation											
compensation from the organization. Report comp. (A)	ensauon for th	ne cale	ndar	year	end	iing wi	រោ ០	r within the organizates (8)	ation's tax y	еаг.	(C)
Name and business addres	s			······				Description of service	es .	··············	Compensation
Total number of independent contractors (including received more than \$100,000 of compensation from				sted	abo	ve) wi	no				

Form 990 (2019) SHARING LIFE COMMUNITY OUTREACH INC 75-2831756 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) (A) Total revenue Revenue excluded Related or exempt Unrelated function revenue business revenue from tax under sections 512-514 Federated campaigns b 1b Contributions, Gifts, Grants and Other Similar Amounts ¢ Fundraising events 1c 140,725 1d đ Government grants (contributions) . . 1e All other contributions, gifts, grants, and similar amounts not included above 29,449,131 Noncash contributions included in \$27,538,569 h Total. Add lines 1a-1f · · · · · · · · · · · · ▶ 29,589,856 **Business Code** 2a CDP INCOME 900099 529,199 529,199 Program Service Revenue b SERVICE FEES 900099 54,600 54,600 f All other program service revenue g Total. Add lines 2a-2f 583,799 Investment income (including dividends, interest, and Income from investment of tax-exempt bond proceeds 6a Gross rents 6а b Less: rental expenses . . 6b c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory 7a b Less: cost or other basis Other Revenue 7b and sales expenses . . 7с c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ 140,725 of contributions reported on line 1c). See Part IV, line 18 8a 12,807 b Less: direct expenses d8 12,807 c Net income or (loss) from fundraising events 9a Gross income from gaming activities, See Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 10a returns and allowances . . 10b b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellanous Revenue

e Total. Add lines 11a-11d

d All other revenue

Total revenue. See instructions · · · · · · · · · · · · ▶

30,175,634

585,778

75-2831756

SHARING LIFE COMMUNITY OUTREACH INC

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 a	ny line in this Part IX			
Do n	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundralsing expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	28,092,075	28,092,075		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	90,978	45,078	23,247	22,653
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	602,168	485,641	46,541	69,986
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	17,933	12,716	1,322	3,895
10	Payroll taxes	51,048	39,402	5,206	6,440
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying - · · · · · · · · · · · · · · · · · ·				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	54,762	15,241	9,806	29,715
12	Advertising and promotion				
13	Office expenses	43,438	22,896	2,648	17,894
14	Information technology				
15	Royalties				
16	Occupancy	59,958	53,233	5,343	1,382
17	Travel	7,403	6,854		549
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	33,958	32,363	1,595	
23	Insurance	23,451	20,231	2,369	851
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.)				
а	OTHER EXPENSES	20,516	2,810	6,825	10,881
b					
C				***************************************	
d					
6	All other expenses				
25	Total functional expenses. Add lines 1 through 24e · · ·	29,097,688	28,828,540	104,902	164,246
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 if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 1 423,213 1,135,715 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 48,530 3 335,928 Accounts receivable, net 4 20,724 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 Inventories for sale or use 479,391 521,994 9 Prepaid expenses and deferred charges 75 9 24,731 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 477,942 606,798 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 14 15 Other assets. See Part IV, line 11 15 3,333 16 Total assets. Add lines 1 through 15 (must equal line 33) 1,449,875 2,628,499 17 Accounts payable and accrued expenses 17 68,574 35,910 18 18 19 Deferred revenue 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24

Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X

Organizations that follow FASB ASC 958, check here

Total net assets or fund balances

Total liabilities and net assets/fund balances

29 30 31

25

28

32

68,574

1,239,292

1,381,301

1,449,875

142,009

2,628,499 Form 990 (2019)

2,459,247

133,342

169,252

2,317,238

142,009

25

26

32

33

	990 (2019) SHARING LIFE COMMUNITY OUTREACH INC	75-283175	6	Pa	ige 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<u>. []</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	- 1	30,	175,	634
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	29,	097,	688
3	Revenue less expenses. Subtract line 2 from line 1	. 3	1,	077,	946
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4	1,	381,	301
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses				
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10	2,	459,	247
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. 🛛 </u>
				Yes	No
1	Accounting method used to prepare the Form 990:				
	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?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2¢		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
За	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?		3a		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		3b		

EEA

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

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.

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

OMB No. 1545-0047 2019

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number SHARING LIFE COMMUNITY OUTREACH INC 75-2831756

ra	Tt I	Reason for Public Charity	Status (All Or	ganizations must co	ompiete	ınıs parı.) See instructions.		
The	organ	ization is not a private foundation beca	use it is: (For lines	1 through 12, check only	one box.)				
1		A church, convention of churches, or as	sociation of churche	es described in section 1 7	70(b)(1)(A)((i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 990 or 990)-EZ).)				
3		A hospital or a cooperative hospital serv	rice organization de:	scribed in section 170(b)	(1)(A)(iii).				
4		A medical research organization operat	ed in conjunction wi	th a hospital described in	section 170	0(b)(1)(A)(i	iii). Enter the		
		hospital's name, city, and state:							
5		An organization operated for the benef	it of a college or un	iversity owned or operate	ed by a gov	ernmental	unit described in		
		section 170(b)(1)(A)(iv). (Complete Pa	-	, ,	, .				
6	П	A federal, state, or local government or		lescribed in section 170/	b)(1)(A)(v).				
7	$\overline{\mathbf{x}}$	An organization that normally receives	•	*		nit or from t	the general public		
	u.i.i	described in section 170(b)(1)(A)(vi). (·	, no capport nom a gota	, in the state of		and general public		
8		A community trust described in section		^omnlete Part II \					
9	Ħ	An agricultural research organization de			in conjunct	ion with a l	and grant college		
•	LJ	or university or a non-land-grant colleg							
			e or agriculture (se	e manucions), Enter me	manne, city,	and state t	of the college of		
10	П	University:	: (1) mars than 22 (1/20/ of its support from a	antibution		nhia face and green		
,,,	Li	An organization that normally receives					•		
		receipts from activities related to its ex	·	-					
		support from gross investment income		•		in tax) iror	n businesses		
	П	acquired by the organization after June	•		,	• • •			
11	님	An organization organized and operated	•	•		•			
12	<u></u>	An organization organized and operate	•	• •		· ·			
		of one or more publicly supported organ					, , , ,		
		Check the box in lines 12a through 12a		** **		•	•		
	а	Type I. A supporting organization o	perated, supervised	I, or controlled by its supp	orted organi	ization(s), t	ypically by giving		
		the supported organization(s) the p	power to regularly a	appoint or elect a majority	of the direct	ctors or tru	stees of the		
		supporting organization. You must	complete Part IV,	Sections A and B.					
	b	Type II. A supporting organization s	supervised or contro	olled in connection with its	supported o	organization	n(s), by having		
		control or management of the sup	porting organization	vested in the same pers	ons that co	ntroi or ma	inage the supported		
		organization(s). You must comple	te Part IV, Section	s A and C.					
	C	Type III functionally integrated. /	supporting organiz	zation operated in connect	ion with, an	d functiona	lly integrated with,		
		its supported organization(s) (see in	nstructions). You m	ust complete Part IV, Se	ections A, I	D, and E.			
	ď	Type III non-functionally integral	ted. A supporting or	ganization operated in cor	nnection wit	h its suppo	rted organization(s)		
		that is not functionally integrated.	The organization ge	nerally must satisfy a dis	tribution rec	quirement a	and an attentiveness		
		requirement (see instructions). You	ı must complete P	art IV, Sections A and D	, and Part	v.			
	е	Check this box if the organization	received a written d	letermination from the IR:	S that it is a	Type I. Ty	pe II, Type III		
		functionally integrated, or Type III i				, ,			
	f	Enter the number of supported organiz					* * * * * * * * * * * * *		
	g	Provide the following information about							
		Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	manization	(v) Amount of monetary	(vi)	Amount of
	119	7	(11) 4.11	(described on lines 1-10	listed in you		support (see		support (see
				above (see instructions))	docum	ent?	instructions)	in	structions)
					Yes	No			
			·		100	1.0		 	***************************************
(A)									
(B)									
		W. 1/1				<u> </u>			······································
(C)						T. C.			
				ACTION ENGLANDE ENGLANDE TO THE THE THE THREE TH					
(D)									
					<u> </u>				
(E)									
T 4								<u> </u>	

990 or 990-EZ) 2019 SHARING LIFE COMMUNITY OUTREACH INC 75-2831756
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.)

	tion A. Public Support						
Cal	endar 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.")	4,276,820	9,794,678	9,209,291	10,928,237	29,589,856	63,798,882
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	4,276,820	9,794,678	9,209,291	10,928,237	29,589,856	63,798,882
5	The portion of total contributions by	8 2 8 8 8 8					
	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)						77,687
6	Public support. Subtract line 5 from line 4						63,721,195
	tion B. Total Support						
	endar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4 · · · · · · · · · · ·	4,276,820	9,794,678	9,209,291	10,928,237	29,589,856	63,798,882
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from				***************************************		
	similar sources	6,500	4,500	164			11,164
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 VI.)	32,959	38,798	19,104	41,533	1,979	134,373
11	Total support. Add lines 7 through 10					37.68 (3).62 (3).07	63,944,419
12	Gross receipts from related activities, etc. (se	ee instructions)	* * * * * *			12	1,085,677
13	First five years. If the Form 990 is for the org	anization's first,	second, third,	fourth, or fifth t	ax year as a se	ection 501(c)(3)	
	organization, check this box and stop here						▶ 🗍
	tion C. Computation of Public Suppor						
14	Public support percentage for 2019 (line 6, c	olumn (f) divide	ed by line 11, co	olumn (f)) 🕠		14	99.65 %
	Public support percentage from 2018 Sched					15	97.23 %
16a	33 1/3% support test - 2019. If the organizati	on did not chec	k the box on lin	e 13, and line	14 is 33 1/3% o	r more, check tl	his
	box and stop here. The organization qualifies	as a publicly s	upported organ	ization			🕨 🔀
b	33 1/3% support test - 2018. If the organizati	on did not chec	k a box on line	13 or 16a, and	line 15 is 33 1/	'3% or more, ch	eck
	this box and stop here. The organization qual	lifies as a public	cly supported or	rganization .			
17a	10%-facts-and-circumstances test - 2019.	f the organization	on did not chec	k a box on line	13, 16a, or 16b	o, and line 14 is	
	10% or more, and if the organization meets th	e "facts-and-cir	cumstances" te	est, check this	box and <mark>stop</mark> h	ere. Explain in	
	Part VI how the organization meets the "facts	s-and-circumsta	ances" test. The	e organization	qualifies as a	publicly support	ted
	organization						▶ 🗍
þ	10%-facts-and-circumstances test - 2018.	f the organization	on did not chec	k a box on line	13, 16a, 16b, c	or 17a, and line	
	15 is 10% or more, and if the organization me	ets the "facts-ar	nd-circumstanc	es" test, check	this box and s	top here.	
	Explain in Part VI how the organization meet					7	cly
	supported organization						
18	Private foundation. If the organization did no	ot check a box o	n line 13, 16a,	16b, 17a, or 17	7b, check this b	ox and see	_
	instructions						ъ П

90 or 990-EZ) 2019 SHARING LIFE COMMUNITY OUTREACH INC Support Schedule for Organizations Described in Section 509(a)(2) Part III

(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.)

Sec	tion A. Public Support			· · · · · · · · · · · · · · · · · · ·			
	endar 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					_ سون	
	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					1	
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
~ .	line 6.)		1				
	tion B. Total Support			7		T	
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6					<u> </u>	
ıua	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						
	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						
4.0	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,			-	-		
	and 12.)	L.,				<u> </u>	
14	First five years. If the Form 990 is for the org				*		,
<u>~</u>							· · · ·
	ction C. Computation of Public Suppor		·				
	Public support percentage for 2019 (line 8, c					15	%
	Public support percentage from 2018 Sched					16	%
	tion D. Computation of Investment Inc	·····		40		1 2-9 1	
17	Investment income percentage for 2019 (line					17	%
18	Investment income percentage from 2018 Sch					18	%
19a	33 1/3% support tests - 2019. If the organiza						
	17 is not more than 33 1/3%, check this box a		_	•		-	
þ	33 1/3% support tests - 2018. If the organiza						
	line 18 is not more than 33 1/3%, check this b						· · · · ·
20	Private foundation. If the organization did no	ot check a box of	on line 14, 19a,	or 19b, check	this box and se	e instructions	▶ []

Supporting Organizations Part IV

(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

- Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer
- 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)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- 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?
- 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- c Did a disgualified 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes." answer 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

,	• • • • •		***************************************
		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4C		
	5a		
	5b		
	5c		
	6		
	7		
	่ห		
	9a		
	9b		
	9c.		
	Tua		
	10b		

Pa	art IV Supporting Organizations (continued)			
		·	Yes	No
11	, , , , , , , , , , , , , , , , , , , ,			
а	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	ļ	
	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 Pa	rt VI. 11c	<u> </u>	<u></u>
Sec	ction B. Type I Supporting Organizations		T	T
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	FOR THE PARTY OF T	Yes	No
	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	P23-07077-77-923		
	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 support	ed		
	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 Pa			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	1100000000	400000000000000000000000000000000000000
Sec	ction C. Type II Supporting Organizations		L	<u> </u>
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	tors		0.65 (1.00)
	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	★ 1750 00 554 400	10000	
	the supported organization(s).	1	94455048653	#8000000000
Sec	ction D. All Type III Supporting Organizations		L	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of t	he 🗔		
	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 prov	rided? 1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the suppo	rted		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part V	! how		
	the organization maintained a close and continuous working relationship with the supported organization(s,). 2		
3	=1		347707765b	1634-64610
	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		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1		r (see instruction:	s).	
a				
b	= 3 · · · · · · · · · · · · · · · · · ·			
C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nt entity (see instru		
2	· · · · · · · · · · · · · · · · · · ·	- CONTRAVA	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purpose	s of		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			ve S
	those supported organizations and explain how these activities directly furthered their exempt purpose	10000000000000000000000000000000000000		
	how the organization was responsive to those supported organizations, and how the organization determine	1797.051.00%		
,	that these activities constituted substantially all of its activities.	2a		720040600
b	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or	1.0000000000000000000000000000000000000		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI th	9		
	reasons for the organization's position that its supported organization(s) would have engaged in these			(1000)
_	activities but for the organization's involvement.	2b	1	\$3144.05650V
3	3			
а	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			VIII.
L	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	V02000000	4 450 9990
ស	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of its supported organizations? If "You " denotibe in Part VI the role played by the organization in this regre	August 1000 to		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regar	d. 3b	1	L

Schedule A (Form 990 or 990-EZ) 2019 SHARING LIFE COMMUNITY OUTREACH INC 75-2831756 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 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. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3. 4 Depreciation and depletion 5 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 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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): Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 1 Enter 85% of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 3 Enter greater of line 2 or line 3. 4 Income tax imposed in prior year 5

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

	t V Type III Non-Functionally Integrated 509(a)		zations (continued)	11/56 Page /
Sec	ction D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity	, , , , , ,		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizati	ions	\$\text{2.5}
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 th	e organization is respons	ive	
	(provide details in Part VI). See instructions.	,		
9	Distributable amount for 2019 from Section C, line 6			
10				
S	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
	Distribute Description of the Control of the Contro		Pre-2019	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			
	From 2014			
	From 2015			
~~~~~	From 2016			
***************************************	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
***************************************	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			
***************************************	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 3			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
	Excess from 2016			
	Excess from 2017			

d Excess from 2018 e Excess from 2019 . . . .

### SCHEDULE D (Form 990)

**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.

Department of the Treasury
Internal Revenue Service

| Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Mark | Service | Ma

► Attach to Form 990.

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

SHA	RING LIFE COMMUNITY OUTREACH INC		75-2831756
Pa	rt I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or Acco	
	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		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		**************************************
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ing that the assets held in donor advised	
	funds are the organization's property, subject to the organization	<u> </u>	
6	Did the organization inform all grantees, donors, and donor advi	•	tum tum
	only for charitable purposes and not for the benefit of the donor	-	
	•		· · · · · · · · · · · · · · · · · · ·
Pa	rt II Conservation Easements.		The state of the s
	Complete if the organization answered "Yes" or	Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or education of land for public use (e.g., recreation or education of land for public use (e.g., recreation or education of land for public use (e.g., recreation or education of land for public use (e.g., recreation or education of land for public use (e.g., recreation or education of land for public use (e.g., recreation or education of land for public use (e.g., recreation or education or education of land for public use (e.g., recreation or education		of a historically important land area
	Protection of natural habitat	-	of a certified historic structure
	Preservation of open space		or a doriginal motorio opasia.
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a co	nservation
_	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		· · · 2a
b		***	
c	Number of conservation easements on a certified historic struct		
ď	Number of conservation easements included in (c) acquired after	• •	
•			2d
3	Number of conservation easements modified, transferred, relea		
	tax year	aca, extinguished, or terminated by the orga	anzanan dang me
4	Number of states where property subject to conservation easen	antielocated 🐎	
5	Does the organization have a written policy regarding the period		
•	violations, and enforcement of the conservation easements it ho	•	· · · · · · · · · · · · · · · · · · ·
6	Staff and volunteer hours devoted to monitoring, inspecting, har		land Sunt
Ÿ	b	iding of violations, and embreing conservat	for easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling	a of violations, and anforcing consequation a	seemente during the year
•	> \$	y or violations, and entitioning conservation e	rasements during the year
8	Does each conservation easement reported on line 2(d) above:	esticty the requirements of section 170/h)//	VRVi)
Ü			
0	In Part XIII, describe how the organization reports conservation		lamed 4-read
•	balance sheet, and include, if applicable, the text of the footnote	· ·	
	organization's accounting for conservation easements.	to the organization's infancial statements ti	rat describes the
Da	rt III Organizations Maintaining Collections	of Art Historical Treasures or	Other Similar Assets
65000	Complete if the organization answered "Yes" o		Ottor Ottimar Addeto.
1a	If the organization elected, as permitted under FASB ASC 958, r		alanca chaat worke
10	of art, historical treasures, or other similar assets held for public		
	service, provide, in Part XIII the text of the footnote to its financia		ance of public
<b>.</b>	•		as about works of
b	If the organization elected, as permitted under FASB ASC 958, t	,	
	art, historical treasures, or other similar assets held for public ex	mbilion, education, or research in lumeran	ce or public service,
	provide the following amounts relating to these items:		<b>.</b> .
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treasu		n, provide the
	following amounts required to be reported under FASB ASC 958		
a	Revenue included on Form 990, Part VIII, fine 1		***************************************
b	Assets included in Form 990, Part X		

75-28317	756	Page	2
		 	•

	organizations Maintaining C			Total and the second	aller to the second			ets (conur	luea)
3	Using the organization's acquisition, accession,	and other records, ch	neck any	of the follow	ving that mak	e significant use of	its		
	collection items (check all that apply):			_					
а	Public exhibition		d		or exchange	programs			
b	Scholarly research		е	Other					
С	Preservation for future generations								
4	Provide a description of the organization's collec-	tions and explain how	w they fur	ther the org	ganization's e	xempt purpose in F	² art		
	XIII.								
5	During the year, did the organization solicit or re-	ceive donations of an	t, historica	al treasures	s, or other sin	nilar			
1	assets to be sold to raise funds rather than to be		of the orga	anization's	collection?			Yes	☐ No
Pa	rt IV Escrow and Custodial Arran	~	-						
	Complete if the organization a 990, Part X, line 21.	nswered "Yes" o	on Form	1 990, Pa	art IV, line	9, or reported	an amou	ınt on Fori	m
1a	Is the organization an agent, trustee, custodian of	or other intermediary	for contri	butions or c	ther assets r	not			
	included on Form 990, Part X?							· Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII and	complete the followi	ng table:						
							Amo	unt	
C	Beginning balance					. 1c			
d	Additions during the year					. 1d			
е	Distributions during the year					. 1e			
f	Ending balance					. 1f			
2a	Did the organization include an amount on Form	990, Part X, line 21,	for escro	w or custoo	dial account li	iability?		Yes	No
b	If "Yes," explain the arrangement in Part XIII. Ch					55.0			П
Pai	rt V Endowment Funds.								
	Complete if the organization a	nswered "Yes" o	n Form	990, Pa	art IV, line	10.			
		(a) Current year	(b) Pr	ior year	(c) Two year	s back (d) Three	vears back	(e) Four year	s back
1a	Beginning of year balance	***			(-)	(2) 1000	,	(-7 : 52: )53:	
b	Contributions								
С	Net investment earnings, gains, and								
1.00	losses · · · · · · · · · · · · · · · · · ·								
d	Grants or scholarships								
6	Other expenditures for facilities and								
Ü	programs								
f	Administrative expenses								
	End of year balance								<del></del>
g 2	Provide the estimated percentage of the current	year and balance (lin	o 1a poli	ımn (a\\ ha	ld so:				
	Board designated or quasi-endowment	200 00	ie ig, con	uiiii (a)) ne	au as.				
a		%						cole	
b									
C	Term endowment	1.4000/							
	The percentages on lines 2a, 2b, and 2c should	75				ā.			
3a	Are there endowment funds not in the possession	n of the organization	that are i	neld and ad	ministered to	or the		[v	
	organization by:							Yes	s No
	(i) Unrelated organizations			* * * * *				3a(i)	
11.01	(ii) Related organizations						• • • • •	3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization							3b	
4	Describe in Part XIII the intended uses of the org		ent funds.						
Pai	t VI Land, Buildings, and Equipm		_	000 B			000 B		
	Complete if the organization a	nswered "Yes" o	n Form	1990, Pa	irt IV, line	11a. See Form	1 990, Pa	art X, line	10.
	Description of property	(a) Cost or other			r other basis	(c) Accumulated	i l	(d) Book valu	1e
		(investmen	nt)	(6	other)	depreciation			
1a	Land						1865		
b	Buildings	•							
С	Leasehold improvements				530,533	49,	089	481	,444
d	Equipment			1	198,703	73,	349	125	,354
_е	Other	*							
Total	. Add lines 1a through 1e. (Column (d) must equal	Form 990, Part X, co	lumn (B),	line 10c.)			. ▶	606	,798

Part VII	Complete if the organization answere	ed "Yes" on For	m 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:
(1) Financial o	derivatives	(* * )* * (*) * (*) *			<del></del>
	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)	The second secon		-		
(G) (H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)			CHARLES CONTROL OF THE CONTROL OF TH	
Part VIII	Investments - Program Related.				
i aic viii	Complete if the organization answere	d "Yes" on Forr	n 990, Part IV	, line 11c. See Form	990, Part X, line 13.
	(a) Description of investment		(b) Book value	(	c) Method of valuation: r end-of-year market value
(1)					, and anyon management
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answere	d "Yes" on Forr	n 990, Part IV	, line 11d. See Form	990, Part X, line 15.
		escription			(b) Book value
	SITED FUNDS				3,333
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	//\				
Part X	(b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.				3,333
FaitA		d "Voo" on Forn	~ 000 Dort IV	line 11e er 11f Coe	Form 000 Dort V
	Complete if the organization answere line 25.	u res on ron	11 990, Pait IV,	, line Tie of Tii. See	Porm 990, Part X,
1.	(a) Description of liability	(b) Book va	alue		
(1) Federal in	ncome taxes				
(2)PPP LOA	'N	1	33,342		
(3)			1.12		
(4)					
(5)					
(6)					
(7)			45		
(8)					
(9)	20 0 1020 07100 E92 Tables to personal resource to				
Total, (Column ()	b) must equal Form 990, Part X, col. (B) line 25.) . >	1	33 343		

^{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

Pa	rt XI Reconciliation of Revenue per Audited Financial Statem		r Ketum.
***************************************	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:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	26	
c	Recoveries of prior year grants	2c	1
ď	Other (Describe in Part XIII.)	2d	1 1
e	Add lines 2a through 2d	<u> </u>	
	Subtract line 2e from line 1		2e
3		· · · · · · · · · · · · · · · · · · ·	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add fines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Pa	rt XII Reconciliation of Expenses per Audited Financial State		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	1 1
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	<u> </u>	20
3	Subtract line 2e from line 1		3
A	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
	Other (Describe in Part XIII.)	<u> </u>	-
b	· · · · · · · · · · · · · · · · · · ·	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.)		<u> </u>
Pa	rt XIII Supplemental Information.		Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se
Pai Provi	rt XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Part	Aliana Library and a second se

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

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

SHARING LIFE COMMUNITY OUTRI		·			75-28	31756
Part I Fundraising Activities Form 990-EZ filers are no		-		wered "Yes" on I	orm 990, Part IV,	line 17.
Indicate whether the organization rais     Mail solicitations     Internet and email solicitations     Phone solicitations     In-person solicitations      Did the organization have a written or	ed funds through a	ny of the follo e f g	owing activitie Solicitation of Solicitation of Special fundr	f non-government gra f government grants raising events	nts	
or key employees listed in Form 990, b If "Yes," list the 10 highest paid individ compensated at least \$5,000 by the o	Part VII) or entity ir uals or entities (fur	connection	with professio	onal fundraising servi	ces?	es No
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody (	ndraiser have or control of butions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1		Yes	No			
2		And Andrews				
3						
4						
6						
7						
8						
9		**************************************				
10			H			
Total			>			
3 List all states in which the organization registration or licensing.				ns or has been notified	d it is exempt from	<u> </u>
	·····					
				**************************************		
***************************************						W-V

Schedule G (Form 990 or 990-EZ) 2019 SHARING LIFE COMMUNITY OUTREACH INC Page 2 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 GALA NONE col. (c)) (event type) (event type) (total number) Revenue Gross receipts 153,532 153,532 Less: Contributions 140,725 140,725 Gross income (line 1 minus 12,807 12,807 Cash prizes Noncash prizes Rent/facility costs . . . . . . . . . Direct Expenses Food and beverages Entertainment Other direct expenses 12,807 12,807 Direct expense summary. Add lines 4 through 9 in column (d) 12,807 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. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming col. (a) through col. (c)) bingo/progressive bingo 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor 6 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: is the organization licensed to conduct gaming activities in each of these states? b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

If "Yes," explain:

# Grants and Other Assistance to Organizations,

Open to Public OMB No. 1545-0047 Inspection
Employer identification number 2019 Governments, and Individuals in the United State's 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.

Department of the Treasury Internal Revenue Service	₩ Go to	► Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	atest information.			Open to Fublic Inspection
Name of the organization					Employer Identification number	number
SHARING LIFE COMMUNITY OUTREACH INC	HINC				75-2831756	
Fart   General Information on Grants and Assistance	s and Assistance					
i Does the organization maintain records to substantiate the amount of the the selection criteria itsed to award the greats or assistance?	o substantiate the amount of the graf	grants or assistance, the grantees' eligibility for the grants or assistance, and	eligibility for the grants o	r assistance, and		- N
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for monitoring the use of gra	grant funds in the United States.			* * * * * * * * * * * * * * * * * * *	Sal W
Part II Grants and Other Assistance Part IV, line 21, for any recipion	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.	and Domestic Governmer 000. Part II can be duplicate	nts. Complete if the o	rganization answered is needed.	"Yes" on Form 99(	
1 (a) Name and address of organization or government	(b) EIN (c) IRC section (if applicable)	section (d) Amount of cash cable) grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)				The same of the sa		
(2)			NATIONAL CONTRACTOR AND A SECOND		Transaction of the contraction o	
(3)						
(4)						
(5)			The same of the sa		Annual control of the	
(9)						**************************************
(1)						Annual result of the state of t
(8)						
(6)						
(10)					The state of the s	
<ul> <li>2 Enter total number of section 501(c)(3) and government organizations list</li> <li>3 Enter total number of other organizations listed in the line 1 table · · · ·</li> </ul>	lions lis	ted in the line 1 table			A A	
For Paperwork Reduction Act Notice, see the Instructions for Form 990. $^{ m EEA}$	e Instructions for Form 990.			riumrakajang spanjang tang ang ang ang ang ang ang ang ang ang	Şc	Schedule I (Form 990) (2019)

Page 2 Schedule I (Form 990) (2019) (f) Description of noncash assistance CLOTHING FOOD TOYS ETC Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. n 990) (2019) SHARING LIFE COMMUNITY OUTREACH INC

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) 27,467,440 OTHER noncash assistance (d) Amount of (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance 1 CLIENT ASSISTANCE Part IV Part III N m tO Ģ EEA

Schedule I (Form 990) (2019)

### SCHEDULE M (Form 990)

## **Noncash Contributions**

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047
2019

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Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.

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SHARING LIFE COMMUNITY OUTREACH INC

Employer identification number 75–2831756

Par	t 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) of determination		
1	Art - Works of art								
2	Art - Historical treasures							WALE FORES	
3	Art - Fractional interests								
4	Books and publications	X		14,056	FAIF	VAL	UE		
5	Clothing and household								
	goods · · · · · · · · · · · · ·	X		348,870	FAIF	VAL	UE		
6	Cars and other vehicles								
7	Boats and planes								
8	intellectual property								
9	Securities - Publicly traded								
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	x		27,133,221					
20	Drugs and medical supplies								
21	Taxidermy								*************
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts							**********	
25	Other ►(TOYS AND GAMES )	Х		32,458	FAIF	VAL	UE		
26	Other ► (MEDICAL EQUIPME )	х		9,964	FAIF	VAL	UE	*********	
27	Other ►()					***********			
28	Other ► (								
29	Number of Forms 8283 received by the or	rganization di	uring the tax year for contribution	ns for					
	which the organization completed Form 8	283, Part IV,	Donee Acknowledgement		29				
							Y	es	No
30a	During the year, did the organization recei	ive by contrib	ution any property reported in Pa	art I, lines 1 through					
	28, that it must hold for at least three year	s from the da	te of the initial contribution, and	which isn't required					
	to be used for exempt purposes for the er	itire holding p	eriod?				30a		х
b	If "Yes," describe the arrangement in Part	II.							
31	Does the organization have a gift accepta	nce policy tha	at requires the review of any non	standard					
	contributions?					* •	31	X	
32a	Does the organization hire or use third pa	rties or relate	d organizations to solicit, proces	s, or self noncash					
	contributions?						32a		x
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	•							

# SCHEDULE O (Form 990 or 990-EZ)

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 2019

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

SHARING LIFE COMMUNITY OUTREACH INC 75-2831756 01. Governing body meeting documentation (Part VI, line 8a) MINUTES ARE MAINTAINED FOR ALL BOARD MEETINGS. 02. Committee meeting documentation (Part VI, line 8b) MINUTES ARE MAINTAINED FOR ALL MAJOR COMMITTEE MEETINGS 03. Form 990 governing body review (Part VI, line 11) A DRAFT OF THE 990 IS GIVEN TO THE EXECUTIVE DIRECTOR, BOOKKEEPER AND TREASURER FOR REVIEW PRIOR TO FILING. 04. Conflict of interest policy compliance (Part VI, line 12c) EACH DIRECTOR COMPLETES AN ANNUAL STATEMENT OF DISCLOSURE, SLCO-109EA, WHEN REQUESTED BY THE EXECUTIVE DIRECTOR OR A DESIGNEE. IN ADDITION, A DIRECTOR WHO IS AN INTERESTED PERSON DISCLOSES ANY KNOWN OR POTENTIAL CONFLICT OF INTEREST TO THE BOARD OR COMMITTEE THAT EXERCISES BOARD DELEGATED POWERS. IF THE CONFLICT PERTAINS TO A MATTER THAT IS NOT BEFORE THE BOARD OR COMMITTEE, THEN THE DIRECTOR DISCLOSES THE CONFLICT TO THE BOARD PRESIDENT AND EXECUTIVE DIRECTOR AS SOON AS THE DIRECTOR BECOMES AWARE OF THE ACTUAL OR POTENTIAL CONFLICT. FAILURE TO DISCLOSE AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST MAY BE GROUNDS FOR DISCIPLINARY ACTION BY THE BOARD, INCLUDING REMOVAL FROM THE BOARD. ON AN ANNUAL BASIS, THE DIRECTORS ARE REMINDED OF THIS POLICY. 05. CEO, executive director, top management comp (Part VI, line 15a) THE BOARD USES LOCAL AND NATIONAL COMPENSATION GUIDES PRINTED BY REPUTABLE NON PROFIT MANAGEMENT AGENCIES THAT COMPARE SALARIES OF NON PROFIT EMPLOYEES. THE BOARD ALSO CONSIDERS COMPENSATION FROM OTHER LOCAL CHARITIES PERFORMING SIMILAR SERVICES.

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
SHARING LIFE COMMUNITY OUTREACH INC	75-2831756
06. Other officer or key employee compensation (Part VI, line 15b	
SEE NUMBER 5 ABOVE.	
SEE NUMBER 3 ABOVE.	
07. Governing documents, etc, available to public (Part VI, line 19)	
THE EXECUTIVE DIRECTOR MAINTAINS A NOTEBOOK CONTAINING THE GOVERNING DOCUMENT	PQ THESE
The state of the s	no. Bayl 19 in 2 th Sayl Rayl Sayl
DOCUMENTS ARE MADE AVAILABLE FOR REVIEW UPON REQUEST AT THE ORGANIZATION'S A	DMINISTRATIVE
OFFICE.	
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Form 990	Schedule A, L	Line 5 - Exce	ine 5 - Excess 2% Limitation Contributors	ion Contrib	utors	E-PARTE - E-PART	
		(Keep for y	(Keep for your records)			2019	
Name(s) as shown on return						Tax ID Number	
SHARING LIFE COMMUNITY OUTREACH INC	NC					75-2831756	in
	(a)	(q)	(0)	(p)	(e)	(4)	(6)
Name	2015	2016	2017	2018	2019	Total	Excess contributions (col. (f) minus
							the 2% limitation)
TXU ENERGY	366,575	348,000	357,000	285,000		1,356,575	

77,687

TOTAL