1 II I				293931	46	0 5841 8
			15, 2018			UG
Exempt Organizati				ax Return)	OMB No. 1545-0687
			ction 6033(e))	NT 20 201	,	0046
For calendar year 2016 or other tax year beginning					<u> </u>	ZU I D
Department of the Treasury Internal Revenue Service Information about Form 990-T Do not enter SSN numbers on this f			_		<u>or</u>	en to Public Inspection for 1(c)(3) Organizations Only
A Check box if Name of organization (Check) Employe	er identification number
address changed	OOX II HAIHE C	manyec	and see mistractions.		(Employ	rees' trust, see ions)
B Exempt under section Print SHARE FOOD PROGR	AM, IN	IC			23	-2360819
X 501(c)(3/) or Number, street, and room or suite no			estructions.	·	E Unrelate	d business activity codes
408(e) 220(e) Type 2901 W HUNTING P					(See inst	tructions)
408A 530(a) City or town, state or province, coun						
529(a) PHILADELPHIA, PA					5313	90
C Book value of all assets at end of year F Group exemption number (See instruction	ıs.)	>				
5,596,303. G Check organization type ► X 501	(c) corporatio	n [501(c) trust	401(a) trust		Other trust
H Describe the organization's primary unrelated business activity.			STATEMENT 1			
I During the tax year, was the corporation a subsidiary in an affiliated gr		nt-subs	idiary controlled group?	▶ L	Yes	X No
If "Yes," enter the name and identifying number of the parent corporati						
J The books are in care of SKLAR CARMOSIN CP Part I Unrelated Trade or Business Income	'A'S			one number > 2		
		T	(A) Income	(B) Expenses		(C) Net
1a Gross receipts or sales b Less returns and allowances c Balance		۱.,				
b Less returns and allowances c Balance Cost of goods sold (Schedule A, line 7)	F	1c 2				
3 Gross profit. Subtract line 2 from line 1c		3				
4a Capital gain net income (attach Schedule D)		4a				
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b				
c Capital loss deduction for trusts		4c				
5 Income (loss) from partnerships and S corporations (attach statem	ent)	5				
6 Rent income (Schedule C)	•	6	6,700.	1,0	67.	5,633.
7 Unrelated debt-financed income (Schedule E)		7				
8 Interest, annuities, royalties, and rents from controlled organization	· · · · · ·	8				
9 Investment income of a section 501(c)(7), (9), or (17) organization	(Schedule G)	9				
10— Exploited exempt activity income (Schedule I)—	-	10				
11 Advertising income (Schedule J)		11				
Other income (See instructions, attach schedule)		12	6 500	1 0	<u> </u>	
13 Total. Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere (See in	ota intiona fe	13	6,700.	1,0	6/.	5,633.
(Except for contributions, deductions must be direct				s income)		
14 Compensation of officers, directors, and trustees (Schedule K)	<u>, </u>	•		,	14	
15 Salaries and wages			RECE	الراقية ال	15	
16 Repairs and maintenance				<u> ""</u>	16	
17 Bad debts				7 2019 0	17	
18 Interest (attach schedule)			MAY 2	1 2010	18	
19 Taxes and licenses					19	
20 Charitable contributions (See instructions for limitation rules)			OCDE	, <u>11</u>	20	
21 Depreciation (attach Form 4562)			21			
22 Less depreciation claimed on Schedule A and elsewhere on return			22a		22b	
23 Depletion					23	
24 Contributions to deferred compensation plans					24	
25 Employee benefit programs					25	· · · · · · · · · · · · · · · · · · ·
26 Excess exempt expenses (Schedule I)					26	
27 Excess readership costs (Schedule J)					27	
28 Other deductions (attach schedule) 29 Total deductions Add lines 14 through 28					28	
 Total deductions Add lines 14 through 28 Unrelated business taxable income before net operating loss dedui 	ction Subtrac	et line 2) from line 12		29	<u>0.</u> 5,633.
31 Net operating loss deduction (limited to the amount on line 30)	GUOU JUUUA	л шв Z	כו אווו וווטיו כ		30	5,033.
32 Unrelated business taxable income before specific deduction. Subt	tract line 31 fr	um lina	30		32	5,633.
33 Specific deduction (Generally \$1,000, but see line 33 instructions in					33	1,000.
34 Unrelated business taxable income Subtract line 33 from line 32		•	than line 32, enter the sm	aller of zero or		
line 32					34_	4,633.
623701 11-22-17 LHA For Paperwork Reduction Act Notice, see instr	uctions				רו	Form 990-T (2016)
		39)		7	G l

Form 990-1	Binara 100B 1100Hally 1110	23-236	50819		Page 2
Part I	Tax Computation				
35	Organizations Taxable as Corporations. See instructions for tax computation.				
	Controlled group members (sections 1561 and 1563) check here See instructions and				
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order).				
	(1) \$ (2) \$ (3) \$				
h	Enter organization's share of (1) Additional 5% tax (not more than \$11,750) \$				
	(2) Additional 3% tax (not more than \$100,000)				
	Income tax on the amount on line 34	_	0.5	c	0.5
			35c	0	95.
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:	_			
	Tax rate schedule or Schedule D (Form 1041)	•	36		
37	Proxy tax See instructions	•	37		
38	Alternative minimum tax		38	_	
39	Tax on Non-Compliant Facility Income. See instructions		39	_	
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies		40	6	<u>95.</u>
Part I	V Tax and Payments				
41a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 41a				
	Other credits (see instructions) 41b		1		
c	General business credit. Attach Form 3800 41c	-	1 !		
ď	Credit for prior year minimum tax (attach Form 8801 or 8827) 41d		1		
e	Total credits Add lines 41a through 41d		410		
42	Subtract line 41e from line 40		41e		0.5
			42		<u>95.</u>
43		(attach schedule)	43		<u> </u>
44	Total tax Add lines 42 and 43		44	6	95.
	Payments: A 2015 overpayment credited to 2016		-		
	2016 estimated tax payments		1		
C	Tax deposited with Form 8868]		
d	Foreign organizations; Tax paid or withheld at source (see instructions) 45d]		
е	Backup withholding (see instructions) 45e				
f	Credit for small employer health insurance premiums (Attach Form 8941) 45f		1		
	Other credits and payments: Form 2439		1		
- — -	Form 4136 Other Total ▶ - 45g				
46	Total payments. Add lines 45a through 45g		46		
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached		47		22.
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed STATEMENT 2		48		<u> 17.</u>
49	Overpayment If line 46 is larger than the total of lines 44 and 47, enter amount overpaid		1		<u> </u>
	1		49		
50 Part \	Enter the amount of line 49 you want: Credited to 2017 estimated tax Statements Regarding Certain Activities and Other Information (see instruction)	funded >	50		
		-			
51	At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authori			Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file			Ì	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country				
	here >				X
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a for	reign trust?			X
	If YES, see instructions for other forms the organization may have to file.				
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$				
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to t	the best of my kno	wledge and belief i	is true	
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled	dge			.,,
Here	Streams() em > 5/51/8 EXECUTIVE DIRE		lay the IRS discuss ie preparer shown b		with
	Signature of officer Date Title			Yes	No
	Drintffung proporario game			res	NO
_			If PTIN		
Paid	CART II DAGREE	self- employed	70010		
Prepa	rer citte iii Brieffer	1	P0013		
Use O	nly Firm's name ► FRIEDMAN LLP	F±rm's EIN ▶	13-16	1080	9
	301 LIPPINCOTT DRIVE 4TH FLR				
	Firm's address ► MARLTON, NJ 08053	Phone no. 8	<u> </u>	1600	
				000-T	(0040)

Schedule A - Cost of Goods	s Sold. Enter	method of inven	itory valuation N/A					
1 Inventory at beginning of year	1		6 Inventory at end of year	ar		6		
2 Purchases	2		7 Cost of goods sold Subtract line 6					
3 Cost of labor	3		from line 5. Enter here	art I,				
4 a Additional section 263A costs			line 2		7_	<u> </u>		
(attach schedule)	4a		8 Do the rules of section	vith respect to		Yes	No	
 Other costs (attach schedule) 	4b		property produced or	for resale) apply to				
5 Total Add lines 1 through 4b	5		the organization?					<u> </u>
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Personal Property	Lease	ed With Real Pro	per	ty) 	
1 Description of property								
(1) BILLBOARD RENTAL								
(2)								
(3)								
(4)								
	2 Rent receive	ed or accrued			2(a) Dadications diversit		and and which the same	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	than	of rent for p	and personal property (if the percent personal property exceeds 50% or if nt is based on profit or income)	age	3(a) Deductions directi columns 2(a) a SEE STAT	nd 2(b)	(attach schedule)	· II)
(1)			6,7			_ 1,(067.	
(2)								
(3)								
(4)								
Total	0.	Total	6,7	00.	_			
(c) Total income Add totals of columns a here and on page 1, Part I, line 6, column		ter 🕨	6,7	00.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	1,(67.
Schedule E - Unrelated Deb	t-Financed	Income (see	instructions)					
			2 Gross income from		3 Deductions directly conto debt-finan			
1. Description of debt-fir	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule) -		(b) Other deduction (attach schedule	
(1)								
(2)						1		
(3)								
(4)								
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis ilocable to nced property schedule)	6 Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		8 Allocable deduc (column 6 x total of c 3(a) and 3(b))	olumns
(1)			%					
(2)			%					
(3)			%					
(4)			%					
				1	nter here and on page 1, art I, line 7 column (A)		Enter here and on pa Part I, line 7, column	
Totals			•		0			0.
Total dividends-received deductions in	cluded in column	8				•		0.
							Form 990- 1	(2016)

				Exempt (Controlled O	rganızatı	ons				
1 Name of controlled organizat	tion	2 Emp identific numl	cation	3 Net unr (loss) (see	elated income instructions)	4 Tota payn	al of specified nents made	includ	t of column 4 t ed in the contr ation's gross i	olling	6. Deductions directly connected with income in column 5
(1)											
(2)		. <u>.</u>									
(3)						L		<u> </u>			
(4)											
Nonexempt Controlled Organi	zations										
7 Taxable Income		nrelated incom se instructions		9 Total	of specified pay	ments	10. Part of colu in the control gros		nization's	11. De with	ductions directly connected income in column 10
(1)											
(2)											
(3)											
(4)	<u> </u>										
	<u> </u>			,			Add colui Enter here and line 8,		e 1, Parti,	Enter h	id columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals			-			▶			0.		0
Schedule G - Investme	ent Incor	ne of a S	Section	501(c)(7), (9), or	(17) Or	ganizatio	1			
(see inst	ructions)			, <u> </u>							
1, Desc	cription of incor	me			2 Amount of	income	 Deduction Deduction	ected	4. Set-		5 Total deductions and set-asides (col 3 plus col 4)
(1)										_	
(2)											
(3)											
(4)											
.,	· · - · · - · · · · · · · · · ·				Enter here and Part I, line 9, co						Enter here and on page Part I, line 9, column (B)
					_	0.					0
Schedule I - Exploited		Activity	Incom	e, Othe	r Than Ac		ng Incom	e			
1. Description of exploited activity	2. Gunrelated	business from	directly o with pro of unr	penses connected oduction related s income	4 Net inconfrom unrelated business (cominus colum gain, comput through	trade or llumn 2 n 3) If a e cols 5	5 Gross inc from activity is not unrela business inc	that ted	6 Exp attribut colur	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	1	1				1					
(2)											
(3)											
(4)											
Totals ►	Enter here page 1, line 10,	Part I,	page 1	re and on , Part I, col (B)				===			Enter here and on page 1, Part II, line 26
Schedule J - Advertisi	ng Incor		nstruction		<u></u>						
Part I Income From	Periodic	als Repo	orted o	n a Con	solidated	Basis					
1 Name of periodical		2 Gross advertising income		3 Direct ertising costs			5 Circula		6 Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) (2) (3)											
(4)							-				
Totals (carry to Part II, line (5))	•	(0.	0	•						0 Form 990-T (201

Form 990-T (2016) SHARE FOOD PROGRAM, INC

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical		2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7	5 Circulation income	6 Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							
(2)							
(3)							
(4)							
Totals from Part I	>	0.	0.				0
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	}			Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	▶	0.	0.				0

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

1. Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14			0.

Form 990-T (2016)

FORM 990-T	DEDUCTIONS	CONNECTED	WITH RENTAL	INCOME	STATEMENT	5
DESCRIPTION			ACTIVITY NUMBER	AMOUNT	TOTAL	
REAL ESTATE TA	XES	- SUBTOTAI	L - 1	1,067.	1,0	67.
TOTAL TO FORM	990-т, schedui	LE C, COLUI	MIN 3		1,0	67.