

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

2018

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

- A Check box if address changed
B Exempt under section 501(c)(3)
C 408(e) 220(e) 408A 530(a) 529(a)

Name of organization ( ) Check box if name changed and see instructions.) SUNNYSIDE HOME CARE PROJECT, INC
Number, street, and room or suite no. If a P.O. box, see instructions. 43-31 39TH STREET
City or town, state or province, country, and ZIP or foreign postal code LONG ISLAND CITY, NY 11104

D Employer identification number (Employees' trust, see instructions.) 11-2515996
E Unrelated business activity code (See instructions.)

G Book value of all assets at end of year 13,546,837.

F Group exemption number (See instructions.)
G Check organization type X 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of JONATHAN MILLER, CFO Telephone number (718) 784-6173

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows 1-13 detailing various income and expense categories.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income)

Table with 2 columns: Deduction description, Amount. Rows 14-32 detailing various deduction categories.

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Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 33-38. Line 37 amount is 1,000.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 39-44. Line 44 amount is 0.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 45a-55. Line 55 amount is 2,717.

Part VI Statements Regarding Certain Activities and Other Information

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions 56, 57, and 58.

Sign Here

Signature and title section for CFO, dated 6/23/2021.

Paid Preparer Use Only

Preparer information section including name (ROBERT LYONS), firm name (MARKS PANETH LLP), and address (NEW YORK, NY 10017).