

**Return of Organization Exempt From Income Tax**

**2021**

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/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**A** For the 2021 calendar year, or tax year beginning 07/01/2021 and ending 06/30/2022

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization  
**UNDIES PROJECT INC**  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**10 Steep Hollow Lane**  
 City or town, state or province, country, and ZIP or foreign postal code  
**Cos Cob, CT 06807**

**D** Employer identification number  
**81-4243048**

**E** Telephone number  
**203-869-8249**

**F** Group Exemption Number ▶

**G** Accounting Method:  Cash  Accrual Other (specify) ▶

**H** Check  if the organization is not required to attach Schedule B (Form 990).

**I** Website: ▶

**J** Tax-exempt status (check only one) –  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**K** Form of organization:  Corporation  Trust  Association  Other

**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . . . ▶ \$ **127,123**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  
 Check if the organization used Schedule O to respond to any question in this Part I . . . . .

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21		
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received . . . . .																													68,561	
	<b>2</b> Program service revenue including government fees and contracts . . . . .																												0		
	<b>3</b> Membership dues and assessments . . . . .																												0		
	<b>4</b> Investment income . . . . .																												33		
	<b>5a</b> Gross amount from sale of assets other than inventory . . . . .						0																							0	
	<b>b</b> Less: cost or other basis and sales expenses . . . . .						0																							0	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a) . . . . .								0																					0	
	<b>6</b> Gaming and fundraising events:																														
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .									0																					0
	<b>b</b> Gross income from fundraising events (not including \$ <u>44,042</u> of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . .										58,529																				
<b>c</b> Less: direct expenses from gaming and fundraising events . . . . .										6,969																					
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . .																														51,560	
<b>7a</b> Gross sales of inventory, less returns and allowances . . . . .																														0	
<b>b</b> Less: cost of goods sold . . . . .																														0	
<b>c</b> Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) . . . . .																														0	
<b>8</b> Other revenue (describe in Schedule O) . . . . .																														0	
<b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . . ▶																														120,154	
<b>Expenses</b>	<b>10</b> Grants and similar amounts paid (list in Schedule O) . . . . .																													106,430	
	<b>11</b> Benefits paid to or for members . . . . .																													0	
	<b>12</b> Salaries, other compensation, and employee benefits . . . . .																													0	
	<b>13</b> Professional fees and other payments to independent contractors . . . . .																														0
	<b>14</b> Occupancy, rent, utilities, and maintenance . . . . .																														5,000
	<b>15</b> Printing, publications, postage, and shipping . . . . .																														2,361
	<b>16</b> Other expenses (describe in Schedule O) . . . . .																														2,116
<b>17 Total expenses.</b> Add lines 10 through 16 . . . . . ▶																														115,907	
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 9) . . . . .																													4,247	
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .																													28,112	
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O) . . . . .																													0	
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . . ▶																														32,359

**Part II Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments . . . . .	27,309	<b>22</b> 32,320
<b>23</b> Land and buildings . . . . .	0	<b>23</b> 0
<b>24</b> Other assets (describe in Schedule O) . . . . .	803	<b>24</b> 39
<b>25</b> <b>Total assets</b> . . . . .	28,112	<b>25</b> 32,359
<b>26</b> <b>Total liabilities</b> (describe in Schedule O) . . . . .	0	<b>26</b> 0
<b>27</b> <b>Net assets or fund balances</b> (line 27 of column (B) <b>must</b> agree with line 21) . . . . .	28,112	<b>27</b> 32,359

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See Schedule O, Statement 1

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

<b>28</b> <u>More than 50 agencies benefitted from the donations of underwears and clothings.</u>		
(Grants \$ <u>106,430</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>28a</b>	15,511
<b>29</b> _____		
(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>29a</b>	
<b>30</b> _____		
(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>30a</b>	
<b>31</b> Other program services (describe in Schedule O) _____		
(Grants \$ <u>0</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>31a</b>	0
<b>32</b> <b>Total program service expenses</b> (add lines 28a through 31a) . . . . .	<b>32</b>	15,511

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Virginia Cheney Secretary	3.00	0	0	0
Maria Cheng Board member	1.00	0	0	0
Edgar Delaflor Board Member	1.00	0	0	0
Laura Delaflor Co-president	48.00	0	0	0
Joe hadley Board Member	1.00	0	0	0
Craig Jones Board Member	1.00	0	0	0
John langley Treasurer	5.00	0	0	0
Lucy Langley Co-President	48.00	0	0	0
Caroline Lee Board member	1.00	0	0	0
Mamie Lee Fundraising Chair	3.00	0	0	0
(Continued on Schedule O, Statement 2)				

