#### PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. D22404909

<u>990</u>

### 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.

Inspection

Department of the Treasury

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

and ending A For the 2023 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change SING UNTO GOD, INC. Name change \*\*-\*\*\*3601 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 11316 HOUNDS WAY 301-233-3822 termin-ated 222,279. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended ROCKVILLE, MD 20852 H(a) Is this a group return Applica-F Name and address of principal officer: CANTOR ROSALIE WILL Yes X No for subordinates? pending SAME AS C ABOVE **H(b)** Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)(4947(a)(1) or 527 (insert no.) If "No," attach a list. See instructions WWW.SINGUNTOGOD.ORG H(c) Group exemption number **K** Form of organization: **X** Corporation Association Other L Year of formation: 2021 M State of legal domicile: MD Part I Summary Briefly describe the organization's mission or most significant activities: SUG WAS ESTABLISHED TO ELEVATE Activities & Governance THE PRACTICE OF COMMUNAL SINGING AND MEANINGFUL WORSHIP. oxdot if the organization discontinued its operations or disposed of more than 25% of its net assets. 11 Number of voting members of the governing body (Part VI, line 1a) <u>11</u> Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b **Prior Year** Current Year 46,526. 46,490. Contributions and grants (Part VIII, line 1h) Revenue 175,789. 107,928. Program service revenue (Part VIII, line 2g) 0. 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 154,454, Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ........ 0. Ō. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) O. 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 147,095. 184,755. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 147,095. 184,755. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 7,359. 37,524. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 44,883. 7.359. Total assets (Part X, line 16) 0. О. 21 Total liabilities (Part X, line 26) Net/ 359. 883. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Signature of officer Sign CANTOR ROSALIE WILL, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature DEBRA A. MOSES, CPA DEBRA A. MOSES, CPA P00131518 Paid self-employed OSTERMAN, POLLACK & MOSES, LLC Firm's EIN \*\*-\*\*\*7561 Preparer Firm's name Use Only Firm's address 4340 EAST WEST HIGHWAY, SUITE 201 Phone no. (301)652-8590 BETHESDA, MD 20814 May the IRS discuss this return with the preparer shown above? See instructions X Yes

I a	Obselvit Oakselvia Oasselvia a response a respect to a resulting in this Deat III	X
_	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: SING UNTO GOD (SUG), A NON-PROFIT 501C3, WORKS TO ELEVATE TH	₽ ₽₽ХСФТС₽
	OF COMMUNAL SINGING AND MEANINGFUL WORSHIP. GROUNDED IN THE	
	PROGRESSIVE JUDAISM, SUG IS FOR ANY PERSON, CONGREGATION, OF	
	WHO WANTS TO LEARN OR EXPERIENCE THE TRANSFORMATIVE POWER OF	
		UNITING
2	Did the organization undertake any significant program services during the year which were not listed on the	Yes X No
	prior Form 990 or 990-EZ?	Yes 🕰 No
_	If "Yes," describe these new services on Schedule O.	<b></b>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	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 measure	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to	tal expenses, and
	revenue, if any, for each program service reported.	21 000
4a	(Code:) (Expenses \$ 57,826 • including grants of \$) (Revenue \$)	31,900.
	SUG WAS ESTABLISHED TO ELEVATE THE PRACTICE OF COMMUNAL SING	ING AND
	MEANINGFUL WORSHIP.	
4b	(Code: ) (Expenses \$ 103,377 • including grants of \$ ) (Revenue \$	143,889.)
	PROVIDES FINANCIAL SUPPORT FOR CONFERENCES THAT HAVE AS THEI	R PRIMARY
	FOCUS THE PROMOTION OF LEARNING THE TRANSFORMATIVE POWER OF	UNITING
	VOICES.	
4c	(Code:) (Expenses \$	)
		·
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4e	Total program service expenses 161, 203.	,

# Form 990 (2023) SING UNTO GOD, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
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			
3	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			<del></del>
4		4		х
E	during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			,,
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			3,7
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			,,
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			١
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	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		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a		14a		Х
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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	15		Х
16	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	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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

# Form 990 (2023) SING UNTO GOD, INC Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			۱
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			77
	Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
	Schedule K. If "No," go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	0.5		X
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_^
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051-		X
00	Schedule L, Part I	25b		
26	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, trustee, key employee, creator or founder, substantial contributor, or 35%	00		Х
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	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 35% controlled	07		Х
28	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		-25
20				
	instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а		28a		X
h	"Yes," complete Schedule L, Part IV  A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?	200		<del></del>
C	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash 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	25		<del></del>
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		<del></del>
JZ	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		<del></del>
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			<del></del>
٠.	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	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	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	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			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

# SING UNTO GOD, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

		_		Yes	No
<b>2</b> a	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	0			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	·····-  -	2b		v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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				x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		
D	If "Yes," enter the name of the foreign country	— I			
E-0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		E		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any tayable party potify the organization that it was are is a party to a prohibited tax shelter transaction?		5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		<del></del>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solic		30		
ou	any contributions that were not tax deductible as charitable contributions?		6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	·····			
~	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly for goods and services provided to the partly as a contribution and partly as a contribution a	pavor?	7a		х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
	to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require	d?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 109	98-C?	7h		
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.				
а	, , , , , , , , , , , , , , , , , , , ,		9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990. Part VIII, line 12, for public use of club facilities 10b	-			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	$\dashv$			
	Gross income from members or shareholders				
	Gross income from other sources. (Do not net amounts due or paid to other sources against	$\neg$			
~	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	İ			
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?	Г	13a		
	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				
	Enter the amount of reserves on hand				
	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				v
	excess parachute payment(s) during the year?		15		X
40	If "Yes," see the instructions and file Form 4720, Schedule N.		46		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
47	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities		47		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion 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										
	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 on line 1a, above, who are independent 1b 1										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2		Х							
3											
	of officers, directors, trustees, or key employees to a management company or other person?										
4											
5											
6	Did the organization have members or stockholders?	5 6		X							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	Ť									
, u	more members of the governing body?	7a		х							
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		x							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.5									
а		8a	Х								
b	The governing body?  Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD									
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9									
000	tion D. 1 Onoics (mis section b requests information about policies not required by the internal nevenue code.)		Yes	No							
102	Did the organization have local chapters, branches, or affiliates?	10a	163	X							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IUa									
b		10b									
110	and branches to ensure their operations are consistent with the organization's exempt purposes?  Ia Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	Х								
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		х							
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b									
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120									
С		40-									
40	on Schedule O how this was done	12c		Х							
13	Did the organization have a written whistleblower policy?	13		X							
14	Did the organization have a written document retention and destruction policy?	14									
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?	45		v							
a	The organization's CEO, Executive Director, or top management official	15a		X							
b	Other officers or key employees of the organization	15b									
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v							
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed MD										
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	) availa	able							
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finar	ncial								
_	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										
	SING UNTO GOD - 301-233-3822										
	11316 HOUNDS WAY, ROCKVILLE, MD 20852										

# 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

X Check this box if neither the organization n	-			ation	oo r	mpe	nsat	ed any current officer,	director, or trustee.	
(A)	(A) (B)							(D)	(E)	(F)
Name and title	Average hours per week	box	not c	ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) GINA DRANGEL	5.00									
CHAIR	F 00	Х		Х		<u> </u>		0.	0.	0.
(2) ADAM BURNS	5.00	,,		,,						_
VICE-CHAIR	F 00	Х		Х		<u> </u>		0.	0.	0.
(3) RABBI LEORA KAYE	5.00	<b>.</b> ,		3,7						_
SECRETARY (A) NAME GOODES	5.00	Х		Х		-		0.	0.	0.
(4) ALAN GOODIS TREASURER	3.00	x		x				0.	0.	0.
(5) AVIAL ABRAHAM	2.00	^		^		-		0.	0.	0.
DIRECTOR	2.00	X						0.	0.	0.
(6) PAUL BERMAN	2.00					$\vdash$			0.	•
DIRECTOR	2.00	Х						0.	0.	0.
(7) RABBI SAM BLUSTIN	2.00					$\vdash$				
DIRECTOR		x						0.	0.	0.
(8) JOSH BREITZER	2.00					t		-		
DIRECTOR		Х						0.	0.	0.
(9) MELISSA FREY	2.00									
DIRECTOR		Х						0.	0.	0.
(10) MARK PELAVIN	2.00									
DIRECTOR		Х						0.	0.	0.
(11) CRAIG TAUBMAN	2.00									
DIRECTOR		Х						0.	0.	0.
						_				
		-								
		_	_	_		$\vdash$	-			
		1								
		$\vdash$	$\vdash$	_		$\vdash$	$\vdash$			
		$\mathbf{I}$								

332007 12-21-23 Form **990** (2023)

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thouse for related organization in the complete schedule of the compensation from the organization in the organization from the organization from the organization into the organization into the organization into the organization of the compensation from the organization and class and relations of the compensation of the compensation of the transition of the compensation of the compensation of the transition of the compensation of the co	Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	ompensated Employe	es (continued)				
hours for related organization   November of the compensation from the organization   November of the compensation from the organization and related organization is tary former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  1 For any notividual islate on line 1a, is the sum of reportable compensation and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  1 For any notividual islate on line 1a, is the sum of reportable compensation from the organization if I "Yes," complete Schedule J for such production and related organization for the calendar year ending with or within the organization or individual for services  1 Complete this table for your five highest compensated independent contractors that received acroems and reparation from the organization. Report compensation from the organization for the calendar year ending with or within the organization of services  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization of services  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization of services  1 Compensation for the calendar year ending with or within the organization of services  1 Compensation for the calendar year ending with or within the organization of services  1 Compensation for the calendar year ending with or within the organization of services. Compensation from the organization of services.		(A)	(B) Average hours per week	(C) Position (do not check more box, unless person i				<b>)</b> than is bot	one h an	<b>(D)</b> Reportable compensation	(E) Reportable compensatio from related	on d	an	timate	-
1b Subtotal  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization  3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual list on line 1a, is the sum of reportable compensation and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  NONE  Description of services  Compensati			hours for related organizations below	ndividual trustee or director	nstitutional trustee	Officer	key employee	Highest compensated employee	-ormer	organization (W-2/1099-MISC/	(W-2/1099-MIS	SC/	om the anizati d relate	e ion ed	
Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization  Yes  Joint the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Name and business address  NONE  Description of services															
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Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Yes	1b c	Subtotal  Total from continuation sheets to Part V	II, Section A						 	0.		0.			0.
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual isted on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual of services rendered to the organization? If "Yes," complete Schedule J for such person services rendered to the organization? If "Yes," complete Schedule J for such person services rendered to the organization? If "Yes," complete Schedule J for such person services rendered to the organization? If "Yes," complete Schedule J for such person services rendered to the organization? If "Yes," complete Schedule J for such person services rendered to the organization? If "Yes," complete Schedule J for such person services rendered to the organization? If "Yes," complete Schedule J for such person services services rendered to the organization? If "Yes," complete Schedule J for such person services service		Total number of individuals (including but n									),000 of reportab	_			0.
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and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		line 1a? If "Yes," complete Schedule J for s	such individual										3		Х
rendered to the organization? If "Yes," complete Schedule J for such person		and related organizations greater than \$15	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4		Х
the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation of services  Compensation of services  NONE  (B)  (C)  Compensation of services  Compensation of services  (C)	Sec	rendered to the organization? If "Yes," com	•				•						5	$\Box$	Х
Name and business address NONE Description of services Compensation	1											npens			
2 Total number of independent contractors (including but not limited to those listed above) who received more than												(C) Compensation			
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2 Total number of independent contractors (including but not limited to those listed above) who received more than															
2 Total number of independent contractors (including but not limited to those listed above) who received more than															
\$100,000 of compensation from the organization	2	•	-	ot li	mite	d to		_	sted	d above) who received n	nore than				

			2023) SING UNTO GOD	, INC.			^^-^^3	601 Page 9
Pa	rt V	/	Statement of Revenue					
			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D</b> ) Revenue excluded from tax under sections 512 - 514
nts nts	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues 1b					
S, C		С	Fundraising events 1c					
a E			Related organizations					
ini,		е	Government grants (contributions) 1e					
tio 's		f	All other contributions, gifts, grants, and					
혈취			similar amounts not included above 1f	46,490.				
on to		g	Noncash contributions included in lines 1a-1f 1g \$		46 400			
<u>ā Ö</u>		h	Total. Add lines 1a-1f		46,490.			
			COMPEDENCE / CLASSES DEV	Business Code	142 000	142 000		
ice	2	а	CONFERENCE/CLASSES REV COMMUNAL SINGING AND M	900099	143,889. 31,900.	143,889. 31,900.		
le Ser		b	COMMUNAL SINGING AND M	900099	31,900.	31,900.		
m S		C						
gra		d						
Program Service Revenue		f	All other program service revenue					
			Total. Add lines 2a-2f		175,789.			
	3	9	Investment income (including dividends, intere					
	_		other similar amounts)	· .				
	4		Income from investment of tax-exempt bond p					
	5		Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
<u>o</u>		D	Less: cost or other basis and sales expenses <b>7b</b>					
Revenue		_	Gain or (loss) 7c					
Je			Net gain or (loss)					
	8		Gross income from fundraising events (not					
Other	Ū	_	including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
		b	Less: direct expenses8b					
		С	Net income or (loss) from fundraising events					
	9	а	Gross income from gaming activities. See					
			Part IV, line 199a					
			Less: direct expenses 9b					
	40							
	10	а	Gross sales of inventory, less returns					
		h	and allowances 10a Less: cost of goods sold 10b					
			Net income or (loss) from sales of inventory	•				
				Business Code				
Suo e	11	а		22				
ane	•	b						
eve		С						
Miscellaneous Revenue		d	All other revenue					
			Total. Add lines 11a-11d					

0.

Total revenue. See instructions

# Form 990 (2023) SING UNTO GOD Part IX Statement of Functional Expenses

	Check if Schedule O contains a respor	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising 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				
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				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	2,500.		2,500.	
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 Sch O.)	9,000.	4,500. 959.	4,500.	
12	Advertising and promotion	959.	959.		
13	Office expenses	248.		248.	
14	Information technology				
15	Royalties				
16	Occupancy	4 000	4 000		
17	Travel	1,290.	1,290.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	100 000	100.000		
19	Conferences, conventions, and meetings	103,378.	103,378.		
20	Interest				
21	Payments to affiliates	1 545	1 545		
22	Depreciation, depletion, and amortization	1,545.	1,545.	7.5	
23	Insurance	750.		750.	
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 0.)				
а	CONSULTING	19,500.	19,500.		
b	TEACHER EXPENSE	19,275.	19,275.		
С	OUTSIDE SERVICES	8,130.	5,630.	2,500.	
d	CONSULTING ADMIN	6,643.		6,643.	
е	All other expenses	11,537.	5,126.	6,411.	
25	Total functional expenses. Add lines 1 through 24e	184,755.	161,203.	23,552.	0.
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)				

Check if Schedule O contains a response or note to any line in this Part X    Reginning of year	(B) End of year 44,521.
1 Cash · non-interest-bearing 7, 359 · 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 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 (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 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 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,907.  b Less: accumulated depreciation 10b 1,545. 0 · 10c 11 linvestments - publicly traded securities 11 linvestments - publicly traded securities 11 linvestments - program-related. See Part IV, line 11 12 linvestments - program-related. See Part IV, line 11 13 linvestments - program-related. See Part IV, line 11 13 13 linvestments - program-related See Part IV, line 11 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 7,359 · 16 16 17 Accounts payable and accrued expenses 17 17 Accounts payable and accrued expenses 17 18 18 19 Deferred revenue 199 20 Tax-exempt bond liabilities 20 12 Loans and other payables to 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 22 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 25 Other liabilities	End of year
2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 4 5 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 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10, 10, 10, 10, 10, 10, 10, 10, 10, 10,	44.521.
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 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 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 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,907.  b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - brogram-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 7, 359 • 16 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to 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 22 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Other liabilities on included on lines 17-24). Complete Part X	,
Proparation of the securities	
4 Accounts receivable, net 5 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 6 Loans and other receivables from other disqualified persons (as defined under section 4958(n/1)), and persons described in section 4958(c)(3)(B) 6 Loans and loans receivables from other disqualified persons (as defined under section 4958(n/1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 1, 545. 0 10c 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - other securities. See Part IV, line 11 14 Intangible assets 114 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 7 7, 359. 16 17 Accounts payable and accrued expenses 17 Insecured expenses 17 Accounts payable and accrued expenses 17 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to 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 22 Loans and other payables to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
Solution   Comparison   Compa	
controlled entity or family member of any of these persons  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)  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  10b 1,545.  10 Loss: accumulated depreciation  11 Investments - publicly traded securities  11 Investments - program-related. See Part IV, line 11  12 Investments - program-related. See Part IV, line 11  13 Intangible assets  14 Intangible assets.  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 33)  7 , 359 - 16  17 Accounts payable and accrued expenses  17 Acreampt bond liabilities  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability. Complete Part IV of Schedule D  22 Loans and other payables to 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  22 Unsecured notes and loans payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
controlled entity or family member of any of these persons  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)  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  10b 1,545.  10 Loss: accumulated depreciation  11 Investments - publicly traded securities  11 Investments - program-related. See Part IV, line 11  12 Investments - program-related. See Part IV, line 11  13 Intangible assets  14 Intangible assets.  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 33)  7 , 359 - 16  17 Accounts payable and accrued expenses  17 Acreampt bond liabilities  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability. Complete Part IV of Schedule D  22 Loans and other payables to 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  22 Unsecured notes and loans payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
County and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	
### Under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  10b 1,545.  0 10c  11 Investments - publicly traded securities  11 Investments - other securities. See Part IV, line 11  12 Investments - program-related. See Part IV, line 11  13 Investments - program-related. See Part IV, line 11  14 Intangible assets  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 33)  7,359. 16  17 Accounts payable and accrued expenses  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  22 Loans and other payables to 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  22 Loans and other payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
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8   Inventories for sale or use   8   9   Prepaid expenses and deferred charges   9   10a   Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   10a   1,907.	
Prepaid expenses and deterred charges  Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  Less: accumulated depreciation  Less: accumulated depreciation  10b  1,545  0.10c  11 Investments - publicly traded securities  11 Investments - other securities. See Part IV, line 11  12 Investments - program-related. See Part IV, line 11  13 Investments - program-related. See Part IV, line 11  14 Intangible assets  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 33)  7,359  16 Total assets. Add lines 1 through 15 (must equal line 33)  7,359  16 Part IV assets. See Part IV assets are seen as a seen	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  10a 1,907.  b Less: accumulated depreciation  10b 1,545.  0.10c  11 Investments - publicly traded securities  11 Investments - other securities. See Part IV, line 11  12 Investments - program-related. See Part IV, line 11  13 Investments - program-related. See Part IV, line 11  14 Intangible assets  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 33)  7,359. 16  17 Accounts payable and accrued expenses  17 Accounts payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability. Complete Part IV of Schedule D  21 Escrow or custodial account liability. Complete Part IV of Schedule D  22 Loans and other payables to 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  22 Lose and notes and loans payable to unrelated third parties  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
basis. Complete Part VI of Schedule D    10a	
b Less: accumulated depreciation 10b 1,545. 0 10c  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 Intangible assets 14  15 Other assets. See Part IV, line 11 15  16 Total assets. Add lines 1 through 15 (must equal line 33) 7,359 16  17 Accounts payable and accrued expenses 17  18 Grants payable 18  19 Deferred revenue 19  20 Tax-exempt bond liabilities 20  21 Escrow or custodial account liability. Complete Part IV of Schedule D 21  22 Loans and other payables to 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 22  23 Secured mortgages and notes payable to unrelated third parties 23  Unsecured notes and loans payable to unrelated third parties 24  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
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   Intangible assets   14   15   Other assets. See Part IV, line 11   15   15   16   Total assets. Add lines 1 through 15 (must equal line 33)   7 , 359 • 16   17   Accounts payable and accrued expenses   17   18   Grants payable   18   19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   22   Loans and other payables to 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   22   23   24   Unsecured notes and loans payable to unrelated third parties   24   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	362.
12   Investments - other securities. See Part IV, line 11   13   14   Intangible assets   14   15   Other assets. See Part IV, line 11   15   16   Total assets. Add lines 1 through 15 (must equal line 33)   7 , 359 • 16   17   Accounts payable and accrued expenses   17   18   Grants payable   18   19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   22   Loans and other payables to 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   22   23   24   Unsecured notes and loans payable to unrelated third parties   24   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
13   Investments - program-related. See Part IV, line 11   13   14   Intangible assets   14   15   Other assets. See Part IV, line 11   15   16   Total assets. Add lines 1 through 15 (must equal line 33)   7 , 359 • 16   17   Accounts payable and accrued expenses   17   18   Grants payable   18   19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   22   Loans and other payables to 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   22   23   Secured mortgages and notes payable to unrelated third parties   24   Unsecured notes and loans payable to unrelated third parties   24   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
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15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to 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 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
16 Total assets. Add lines 1 through 15 (must equal line 33) 17, 359. 16  17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to 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 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties, and other liabilities not included on lines 17-24). Complete Part X	
17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to 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 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	44,883.
18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 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, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 2 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
Tax-exempt bond liabilities  Escrow or custodial account liability. Complete Part IV of Schedule D  Loans and other payables to 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  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
Tax-exempt bond liabilities  20 21 Escrow or custodial account liability. Complete Part IV of Schedule D  22 Loans and other payables to 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  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to 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 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
Loans and other payables to 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  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
23 Secured mortgages and notes payable to unrelated third parties	
23 Secured mortgages and notes payable to unrelated third parties	
23 Secured mortgages and notes payable to unrelated third parties	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	
of Schedule D 25	
26 Total liabilities. Add lines 17 through 25	0.
Organizations that follow FASB ASC 958, check here	
and complete lines 27, 28, 32, and 33.	
27 Net assets without donor restrictions 7,359. 27	44,883.
28 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 29	
30 Paid-in or capital surplus, or land, building, or equipment fund 30	
31 Retained earnings, endowment, accumulated income, or other funds 31	
and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions  28 Net assets with donor restrictions  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  29 Paid-in or capital surplus, or land, building, or equipment fund  30 Retained earnings, endowment, accumulated income, or other funds  31 Total net assets or fund balances  7,359.32	44,883.
33 Total liabilities and net assets/fund balances 7,359 33	44,883.

Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1				79. 55.			
2	Total expenses (must equal Part IX, column (A), line 25)								
3	Revenue less expenses. Subtract line 2 from line 1	3		3'	7,5	24.			
4									
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain 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		4	1,8	83.			
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
					Yes	No			
1	Accounting method used to prepare the Form 990: X Cash Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basi	s,						
	consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audi	t,			1			
	review, or compilation of its financial statements and selection of an independent accountant?			2c					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule	O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required								
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b					

Form **990** (2023)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

\*\*-\*\*\*3601 SING UNTO GOD, INC. Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organi	ization failed to qualify under Part III. If the organization
fails to qualify under the tests listed below, please complete Part III.)	

Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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						
	The portion of total contributions						
J	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
_	column (f)						
-	Public support. Subtract line 5 from line 4.						
	ction B. Total Support		# \ 0000	1 1 2004	/ n 2000	( ) 0000	(0 T
	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	ic Support Pe	rcentage				
14	Public support percentage for 2023 (I	ine 6, column (f), c	divided by line 11,	column (f))		14	%
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2023. If the o	rganization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or r	more, check this bo	ox and
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization quali	fies as a publicly	supported organiz	zation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstand	ces test, check th	is box and <b>stop he</b>	ere. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizati	on qualifies as a p	oublicly supported	organization		
b	10% -facts-and-circumstances test	_					
	more, and if the organization meets th	_					
	organization meets the facts-and-circu						
18	<b>Private foundation.</b> If the organizatio						

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

(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	qualify under the tests listed beaution A. Public Support	elow, please com	plete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(a) 2019	(6) 2020	(6) 2021	(u) 2022	(e) 2023	(i) iotai
•	membership fees received. (Do not						
	include any "unusual grants.")				14,626.	78,390.	93,016.
2	Gross receipts from admissions,				127,0200	707000	33,0200
2	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose				107,929.	143,889.	251,818.
3	Gross receipts from activities that						
	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ-						
	ization'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				122,555.	222,279.	344,834.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
,	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						344,834.
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(4) 2010	(3) 2020	(6) 2021	122,555.	(e) 2023 222, 279.	344,834.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on 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						
12	assets (Explain in Part VI.)		1		122,555.	222 279	344,834.
	Total support. (Add lines 9, 10c, 11, and 12.)			f =	<u> </u>		<u> </u>
14	First 5 years. If the Form 990 is for the	•		•		. , . , .	ion,
50	check this box and stop here ction C. Computation of Publ						<u></u>
	-			(6)		45	100.00 %
	Public support percentage for 2023 (I					_	4 0 0 0 0
	Public support percentage from 2022 ction D. Computation of Investigation					16	100.00 %
	<u> </u>				<b>N</b>	4-1	•00 %
17						17	
18	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2023. If the						
b	more than 33 1/3%, check this box at 33 1/3% support tests - 2022. If the						and
	line 18 is not more than 33 1/3%, che	ck this box and <b>s</b>	<b>top here.</b> The orga	nization qualifies	as a publicly suppo	rted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check	this box and see ins	structions	

### Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 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.
- 2 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 lines 3b and 3c below.
- **b** 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.
- c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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.
- c 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 lines 5b and 5c 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?
- 6 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.
- 7 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** 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 on 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 disqualified person (as defined on 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 line 10b below.
  - **b** 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		
	8		
	9a		
	9b		
	ฮม		
	9с		
	10a		
	10b		
4	A /Ears	~ 000	0000

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		elow, the governing body of a supported organization?	11a		
b		ily member of a person described on line 11a above?	11b		
		6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
_		in Part VI.	11c		
Sec		3. Type I Supporting Organizations			
		,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		Yes	No
1	Did th	e governing body, members of the governing body, officers acting in their official capacity, or membership of one or		100	110
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	_	prization, describe now the powers to appoint and/or remove officers, directors, or trustees were allocated among the ported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported	-		
_		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	•	I how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
Sec		C. Type II Supporting Organizations			
		<i>y</i> 11 0 0		Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors			110
•		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		nagement of the supporting organization was vested in the same persons that controlled or managed			
		upported organization(s).	1		
Sec		D. All Type III Supporting Organizations	•		
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	-	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3		ason of the relationship described on line 2, above, did the organization's supported organizations have a			
_		cant voice in the organization's investment policies and in directing the use of the organization's			
		ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		orted organizations played in this regard.	3		
Sec		E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the yea <b>(see instructions)</b> .			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2		ties Test. Answer lines 2a and 2b below.		Yes	No
а	Did su	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		apported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	supported organizations and explain how these activities directly furthered their exempt purposes,			
	how th	he organization was responsive to those supported organizations, and how the organization determined			
	that th	nese activities constituted substantially all of its activities.	2a		
b	Did th	e activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or	r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		Ithe reasons for the organization's position that its supported organization(s) would have engaged in			
		activities but for the organization's involvement.	2b		
3		t of Supported Organizations. <b>Answer lines 3a and 3b below.</b>			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Sche	dule A (Form 990) 2023 SING UNTO GOD, INC.			**-***3601 Page <b>6</b>
Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	anizations	_
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust o	n Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st comple	te Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	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		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

6

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

Schedule A (Form 990) 2023

emergency temporary reduction (see instructions).

instructions).

Pa	t V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	anizations (continued)	
Sect	Current Year			
1	Amounts paid to supported organizations to accomplish ex	empt purposes	1	
2	Amounts paid to perform activity that directly furthers exem	npt purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpose	ses of supported organization	s <b>3</b>	
4	4 Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required - page 1)	rovide details in <b>Part VI</b> )	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	7 Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	)		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2023 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		10	
		(i)	(ii)	(iii)

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
c	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i_	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

Schedule A (Form 990) 2023

# Schedule B (Form 990)

## **Schedule of Contributors**

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization

SING UNTO GOD, INC.

\*\*-\*\*\*3601

Organization type (chec	ck one):
Filers of:	Section:
Form 990 or 990-EZ	$\overline{\mathbf{X}}$ 501(c)( $3$ ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	on is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a) contributor, du	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under (1)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one uring the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; 0-EZ, line 1. Complete Parts I and II.
contributor, du literary, or educ	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one uring the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, cational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering in (b) instead of the contributor name and address), II, and III.
year, contributi is checked, ent purpose. Don't	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ter here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively table, etc., contributions totaling \$5,000 or more during the year\$
answer "No" on Part IV,	on that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Name of organization Employer identification number

## SING UNTO GOD, INC.

\*\*-\*\*\*3601

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 19,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- Nume, addition and Emily 1	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

## SING UNTO GOD, INC.

\*\*-\*\*\*3601

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		     \$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		  \$		

Name of organization Employer identification number \*\*-\*\*\*3601 SING UNTO GOD, INC. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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.
Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SING UNTO GOD, INC.

**Employer identification number** \*\*-\*\*\*3601

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 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	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor		
	• •		
Pa	rt II Conservation Easements. Complete if the or		
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply).	
	Preservation of land for public use (for example, recreations)		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation 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			
С	Number of conservation easements on a certified historic st	ructure included on line 2a	2c
d	Number of conservation easements included on line 2c acqu	uired after July 25, 2006, and not	
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year		
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cor	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserve	ation easements during the year
8	Does each conservation easement reported on line 2d abov	e satisfy the requirements of section 170	h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes
9	In Part XIII, describe how the organization reports conservat	tion easements in its revenue and expens	e statement and
	balance sheet, and include, if applicable, the text of the foot	tnote to the organization's financial staten	nents that describes the
_	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections of		other Similar Assets.
	Complete if the organization answered "Yes" on Forn		
1a	If the organization elected, as permitted under FASB ASC 99	· ·	
	of art, historical treasures, or other similar assets held for pu		
	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 99		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in fur	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1		\$
h	Assets included in Form 990, Part Y		¢

Pai	rt III Organizations Maintaining Co	ollections of A	rt, Hist	orical Tr	easures, c	or Other	Similar As	sets(conti	nued)				
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its												
	collection items (check all that apply).												
а													
b	b Cholarly research e Other												
С	Preservation for future generations												
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.												
5	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets												
	to be sold to raise funds rather than to be maintained as part of the organization's collection?												
Pai	Part IV   Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or												
	reported an amount on Form 990, Part X, line 21.												
1a	1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included												
	on Form 990, Part X?												
b	b If "Yes," explain the arrangement in Part XIII and complete the following table:												
	, ,	•	3					Amour	nt				
С	Beginning balance						1c						
d	Additions during the year												
е	Distributions during the year						1e						
f	Ending balance						1f						
2a	Did the organization include an amount on Fo							Yes	No				
	If "Yes," explain the arrangement in Part XIII.						,						
	rt V Endowment Funds Complete if t												
		(a) Current year		rior year			1) Three years ba	ack (e) Fou	r years back				
1a													
b	b Contributions												
c	Net investment earnings, gains, and losses												
d	d Grants or scholarships												
e	Other expenditures for facilities												
·													
f	Administrative expenses												
	End of year balance												
g 2	Provide the estimated percentage of the curre	ant year end haland	L Se (line 1)	r column (	a)) bold as:	<u> </u>							
a	Board designated or quasi-endowment	•	% (iii e 1	y, coluitii (a	ajj rielu as.								
a h	Permanent endowment	%	_′0										
0	Term endowment 9/	<del></del>											
С	The percentages on lines 2a, 2b, and 2c shou												
32	Are there endowment funds not in the posses		ation tha	t are hold a	and administa	rod for the							
Sa	organization by:	Sion of the organiz	ation tha	t are rielu a	iilu auiliiliste	rea for title	7		Yes No				
								20(i)	100 110				
	(i) Unrelated organizations?												
<b>h</b>	(ii) Related organizations?												
ı D								30					
Dai	Describe in Part XIII the intended uses of the ort VI Land, Buildings, and Equipmo		willent	urius.									
ı aı	Complete if the organization answered		) Part IV	lina 11a 9	Saa Form 000	Dart Y li	ne 10						
	•	1			i			(a) Da a	de control				
	Description of property	(a) Cost or of basis (investr			or other		cumulated eciation	(a) Boo	ok value				
	Land	<del>- '</del>	nent)	Dasis	(other)	uepr	COIALIUII						
_	Land												
b	Buildings												
	Leasehold improvements				1,907.		1,545.		362.				
	Equipment				±,,,,,,,,		1,545.		JU4 •				
	Other		V 15	01 :	(D))				362.				
rota	I. Add lines 1a through 1e. (Column (d) must eq	uai Form 990, Part	x, iine 10	лс, coiumn	ı (ヷ <i>))</i>				JU⊿•				

	" on Form 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: Cost or er	nd-of-year market value
) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes	" on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes	on Form 990 Part IV line	11d Cas Faura 000 Dark V line 15	
<del>-</del>	0111 01111 000,1 411111, 11110	Trd. See Form 990, Part X, line 15.	
	Description	Tra. See Form 990, Part X, line 15.	(b) Book value
		Tid. See Form 990, Part X, line 15.	(b) Book value
(а		TTd. See Form 990, Part X, line 15.	(b) Book value
(a		TTd. See Form 990, Part X, line 15.	(b) Book value
(a (1) (2)		TTd. See Form 990, Part X, line 15.	(b) Book value
(a) (a) (a) (a) (a) (a) (b) (a) (b) (a) (b) (a) (b) (a) (b) (a) (b) (b) (a) (b) (b) (b) (b) (b) (b) (b) (b) (b) (b		TTd. See Form 990, Part X, line 15.	(b) Book value
(a) (a) (a) (4)		Trd. See Form 990, Part X, line 15.	(b) Book value
(a) (2) (3) (4) (5)		Trd. See Form 990, Part X, line 15.	(b) Book value
(a (1) (2) (3) (4) (5) (6)		Trd. See Form 990, Part X, line 15.	(b) Book value
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9)	) Description	Trd. See Form 990, Part X, line 15.	(b) Book value
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, column 15, c	) Description	Trd. See Form 990, Part X, line 15.	(b) Book value
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, co	Description		
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes  Complete if the organization answered "Yes	Description		
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes Complete if the organization of liability	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes Complete if the organization of liability (1) Federal income taxes	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes Complete if the organization of liability (1) Federal income taxes (2)	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes Complete if the organization of liability (1) Federal income taxes (2) (3)	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes complete if the organization of liability (1) Federal income taxes (2) (3) (4)	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes Complete if the organization of liability (1) Federal income taxes (2) (3) (4) (5)	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes Complete if the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6)	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes Complete if the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	Description		5.
(a) (1) (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, line 15, complete if the organization answered "Yes Complete if the organization of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	ol. (B))  on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	5.

Pai	rt XI Reconciliation of Revenue per Audited Financial	Statements With Revenu	e per Return	
	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	2b		
С	. ,			
d	,	2d		
е	•			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 . 1		
a	, , , , , , , , , , , , , , , , , , , ,			
b	,			
_				
5 Pai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XII   Reconciliation of Expenses per Audited Financial			
·	Complete if the organization answered "Yes" on Form 990, Part IV		oco per riciani	
1	Total expenses and losses per audited financial statements		11	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	_ · · · · · · · · · · · · · · · · · · ·	2a		
b				
c	0.1.			
	Other (Describe in Part XIII.)			
			2e	
3	Subtract line <b>2e</b> from line <b>1</b>			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5	
Pa	rt XIII Supplemental Information			
	ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid		art V, line 4; Part X, line 2; Pal	π XI,

### **SCHEDULE 0** (Form 990)

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 Form 990-EZ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SING UNTO GOD, INC.

**Employer identification number** \*\*-\*\*\*3601

<u> </u>
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
VOICES.
FORM 990, PART VI, SECTION B, LINE 11B:
THE TAX RETURN IS REVIEWED BY THE CHAIR AS WELL AS THE VICE-CHAIR,
TREASURER AND SECRETARY BEFORE FILING WITH THE INTERNAL REVENUE SERVICE FOR
THE YEAR.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES THEIR GOVERNING DOCUMENTS AVAILABLE TO THE GENERAL
PUBLIC UPON REQUEST OF THE CHAIR

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT							EXO				Боргооналон	Expense		Боргооналон
1	APPLE COMPUTER	11/01/23	200DB	5.00	MQ	19B	1,907.			1,526.	381.			1,545.	19.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						1,907.			1,526.	381.	0.		1,545.	19.
	* GRAND TOTAL 990 PAGE 10 DEPR						1,907.			1,526.	381.	0.		1,545.	19.

**Depreciation and Amortization** (Including Information on Listed Property)

990

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

Attach to your tax return. Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

Identifying number

SIL	G UNTO GOD, INC.			FOR	м 99	0 P	AGE 10			**-***3601
Pai		erty Under Section 1	79 Note: If yo					t V b	efore y	ou complete Part I.
1 N	Maximum amount (see instructions)								1	1,160,000.
	otal cost of section 179 property pla								2	
	hreshold cost of section 179 proper		3	2,890,000.						
	Reduction in limitation. Subtract line		4							
<b>5</b> D	ollar limitation for tax year. Subtract line 4 from I		5							
6	(a) Description of	property		(b) Cost (busin	ess use on	ly)	(c) Elected	l cost		
	isted property. Enter the amount fro					7			1	
	otal elected cost of section 179 pro								8	
	entative deduction. Enter the <b>small</b>								9	
	Carryover of disallowed deduction fro								10	
	susiness income limitation. Enter the		•		•				11	
	ection 179 expense deduction. Add								12	
	Carryover of disallowed deduction to					13				
Pai	Don't use Part II or Part III below fo				- 1:-41 -		41			
				-		-	* :		ı	
	pecial depreciation allowance for qu						-			1,526.
	ne tax year								14	1,320.
	Property subject to section 168(f)(1)								15 16	
_	Other depreciation (including ACRS)  † III MACRS Depreciation (Don	't include listed pro							10	
	MAGNO Depreciation (Both	t molade listed pre	-	ection A						
17 N	MACRS deductions for assets placed	d in service in tax ve			3				17	
	you are electing to group any assets placed in s	•	•	•						
<u> </u>		ts Placed in Service						iatio	n Syst	em
		(b) Month and	(c) Basis fo	r depreciation	_ <u>-</u>	covery	(e) Convention		/lethod	
	(a) Classification of property	year placed in service		nvestment use instructions)		riod	(e) Convention	1 (1) 1	netriou	(g) Depreciation deduction
19a	3-year property									
b	5-year property			381.	5 Y	RS.	MQ	20	0DB	19.
С	7-year property									
d	10-year property									
е	15-year property									
f	20-year property									
g	25-year property				25	yrs.			S/L	
h	Residential rental property	/			27.5	yrs.	MM		S/L	
	- Tiodidential Fortal property	/				yrs.	MM	+	S/L	
i	Nonresidential real property	/			39	yrs.	MM	_	S/L	
	,	/			<u>.                                    </u>		MM		S/L	
	Section C - Assets	Placed in Service	During 202	3 Tax Year U	sing the	Alter	native Depre			stem
<u>20a</u>	Class life								S/L	
b	12-year					yrs.		_	S/L	
<u>c</u>	30-year	/				yrs.	MM	_	S/L	
Do	40-year	\ /			40	yrs.	MM		S/L	
	<b>TIV</b> Summary (See instructions.	•							64	
	isted property. Enter amount from li			O in a ali wasa (a					21	
	otal. Add amounts from line 12, line								20	1,545.
	nter here and on the appropriate line or assets shown above and placed				LIONS - SE	e inst	l		22	1,545.
	ortion of the basis attributable to se		o ourrein yea	ar, Gritor tilo		23				

Part V

**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

	240, Columns (	(a) tillougii (c	) of Section A	, all Ol O	ection b	, and o	CCLIOIT	л арр	ilcabic.							
	Section A -	Depreciation	on and Other	Informa	tion (Ca	ution:	See the	instruc	tions for li	mits for	passeng	jer autor	nobiles.)	1		
24a	Do you have evidence to s	support the bu	siness/investme	ent use cla	aimed?	Y	′es 🗌	☐ No	<b>24b</b> If "Y	es," is tl	ne evide	nce writt	ten?	Yes	No	
	(a) Type of property (list vehicles first)	(a) ype of property st vehicles first)  (b) Date placed in service use percenta			<b>(d)</b> Cost or her basis	(hı	(e) sis for dep usiness/inv use on	estment	(f) Recovery period	(g) Method/ Convention		<b>(h)</b> Depreciation deduction		(i) Elected section 17 cost		
25	Special depreciation allo	owance for q	ualified listed	property	placed	in servi	ce durin	g the t	ax year an	d						
	used more than 50% in	a qualified b	usiness use								. 25					
26	Property used more tha	n 50% in a c	ualified busin	ess use:												
		: :	Ç	%												
		: :	(	%												
		1 1	Ç	6												
27	Property used 50% or le	ess in a quali	fied business	use:												
		1 1	(	%						S/L -						
		1 1	Ç	6						S/L -						
		1 : :		6						S/L -						
	Add amounts in column												_			
29	Add amounts in column	ı (i), line 26. E		on line 7									. 29			
to yo	nplete this section for ve	wer the ques	stions in Secti	on C to s	see if yo	u meet	an exce	ption to	completi	ng this s	section f	or those	vehicles e)	s. <b>(f</b>	·)	
	Total business/investment		-	Vehi	cle 1	Veh	Vehicle 2		Vehicle 3		Vehicle 4		Vehicle 5		cle 6	
	year ( <b>don't</b> include commu															
	Total commuting miles of															
	Total other personal (no	_	•													
	driven							+								
	Total miles driven during	•														
	Add lines 30 through 32			V		V	T N.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	.			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			NI-	
	Was the vehicle availab			Yes	No	Yes	No	Yes	S No	Yes	No	Yes	No	Yes	No	
	during off-duty hours?															
	Was the vehicle used p than 5% owner or relate															
	Is another vehicle availa							+								
	use?	•														
	use:		- Questions	or Empl	overs W	ho Pro	vide Ve	hicles	for Use b	v Their I	I Employe	200				
Ansı	wer these questions to			-	-					-			ren't			
	e than 5% owners or rel			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		P.049										
	Do you maintain a writte	· ·		ohibits a	ıll persor	nal use	of vehic	les. inc	ludina cor	nmuting	. bv vou	r		Yes	No	
38	Do you maintain a writte															
	employees? See the ins	structions for	vehicles used	by corp	orate of	fficers, o	directors	s, or 1%	6 or more	owners						
39	Do you treat all use of v	ehicles by er	nployees as p	ersonal	use?											
40	Do you provide more th	an five vehic	les to your em	ployees	, obtain	informa	tion fror	n your	employees	s about						
1	the use of the vehicles,	and retain th	e information	received	ነ?											
41	Do you meet the require	ements conc	erning qualifie	d autom	obile de	monstr	ation us	e?								
	Note: If your answer to	37, 38, 39, 4	0, or 41 is "Ye	s," don'	t comple	ete Sec	tion B fo	r the c	overed vel	nicles.						
Pa	Irt VI Amortization															
	Description of			(b) amortization begins		(c) Amortiza amour			(d) Code section		(e) Amortiza period or per		Ar fo	(f) nortization or this year		
42	Amortization of costs th	iat begins du	ring your 202	tax yea	ır:							-				
				<u> </u>				-				+				
40	Amendination of the			<u>                                     </u>	<u> </u>							12				
	Amortization of costs th											43				
44	Total. Add amounts in o	column (t). Se	ee tne instruct	ions for	wnere to	report						44				