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Patterson Accounting

Certified Tax Practitioner

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 web site: www.pattersonaccounting.com

Minister's Information

Position _____ Duties _____

Yes No

- Are you ordained, license, commissioned or the equivalent?
- Are you exempt for paying Social Security Tax with an approved form 4361?
- Does your employer own the parsonage you live in? If yes, what is the annual fair rental value? _____
- Does your employer pay any parsonage utilities (*gas, water, electric, cable, etc*) directly to the utility company? If yes, what was the amount paid by the employer? \$ _____
- Do you own your home? Date Purchased _____ Purchase Price _____ Current Value _____
- Have you officially designated in advance your housing allowance? Amount \$ _____
- Does your employer have a written accountable plan for reimbursements?
- Does your employer reimburse your automobile expenses when you submit an auto log of mileage?
- Does your employer reimburse your professional expense when you submit the receipt?
- Does your employer have a flex spending account for medical expenses or child care?
- Does your employer provide group term life insurance over \$50,000?

Your Pay Package

Annual Cash Salary \$ _____
 Annual Cash Housing \$ _____
 Total Cash Pay Package \$ _____
 Amount you receive each payday \$ _____
 Payday is ___ weekly ___ biweekly ___ bimonthly ___ monthly ___

For Patterson Use Only SE Calculation and Section 265 Prorating

W2 FRV _____
 W2 HA _____ Used _____ Excess _____
 Total HA _____ %
 W2 Wages _____ %
 SS Total _____ 100 %
 Unreimbursed Expenses _____ x _____ % = \$ _____

Parsonage Expenses

Parsonage allowance exclusion can apply only to your principle residence. If you changed parsonages during this year, separate the expenses below. List only expenses paid by you directly.

Location: _____

Date Occupied: _____ / _____ / _____

TYPE OF EXPENSE	AMOUNT
Rent Paid _____	
Principal payments _____	
Taxes _____	
Interest _____	
Insurance _____	
Repairs & Upkeep _____	
Furniture/appliance _____	
Decorator items _____	
Utilities (<i>Gas, water, electric, cable</i>) _____	
Misc. supplies/expenses _____	

Location: _____

Date Occupied: _____ / _____ / _____

TYPE OF EXPENSE	AMOUNT
Rent Paid _____	
Principal payments _____	
Taxes _____	
Interest _____	
Insurance _____	
Repairs & Upkeep _____	
Furniture/appliance _____	
Decorator items _____	
Utilities (<i>Gas, water, electric, cable</i>) _____	
Misc. supplies/expenses _____	

