

State postal code Taxpayer \_\_\_\_\_ [1] Spouse \_\_\_\_\_ [2]

	Taxpayer	Spouse	Prior Year Information
If you received a parsonage provided by the church, please complete the following information:			
Fair rental value of parsonage provided by church	+ _____ [5]	+ _____ [6]	_____
Actual parsonage utilities expense	+ _____ [11]	+ _____ [12]	_____
If you received a rental or parsonage allowance provided by the church, please complete the following information:			
Utilities allowance, if separate from parsonage allowance	+ _____ [17]	+ _____ [18]	_____
Actual parsonage expense	+ _____ [20]	+ _____ [21]	_____
Fair rental value of home	+ _____ [23]	+ _____ [24]	_____
Actual utilities expense	+ _____ [26]	+ _____ [27]	_____
Mark if you have claimed exemption from self-employment tax by filing Form 4361 with the IRS _____ [29] _____ [30]			
If you are a self-employed minister, enter any tax-deductible contributions to a 403(b) retirement plan + _____ [33] + _____ [34]			
Unreimbursed Business Expenses - net reimbursed and after 50% Meals & Entertainment reduction:			
_____	+ _____ [36]	+ _____ [37]	_____
_____	+ _____	+ _____	_____
_____	+ _____	+ _____	_____
_____	+ _____	+ _____	_____
_____	+ _____	+ _____	_____
_____	+ _____	+ _____	_____
_____	+ _____	+ _____	_____
_____	+ _____	+ _____	_____
_____	+ _____	+ _____	_____

**NOTES/QUESTIONS:**