

## PASTOR'S TAX WORKSHEET

Please provide the following information for your tax return.

### HOUSING ALLOWANCE & EXPENSES

Designated Housing Allowance	\$	_____
Housing Expenses		
Rent/Mortgage Payments	\$	_____
Furniture, Appliances, etc.	\$	_____
Utilities	\$	_____
Cleaning/Maintenance	\$	_____
Repairs	\$	_____
<b>Total Housing Expenses</b>	\$	_____

### OTHER INCOME

Honorariums	\$	_____
Other	\$	_____

### EXPENSES AGAINST OTHER INCOME

Books	\$	_____	Lodging/Travel	\$	_____
Meals	\$	_____	Office Supplies	\$	_____
Mileage	#	_____	Telephone	\$	_____

### EXPENSES AGAINST A PASTORS W-2 WAGE INCOME

Office Supplies	\$	_____	Books/Subscriptions	\$	_____
Supplies	\$	_____	Business Telephone	\$	_____
Meals	\$	_____	Seminars	\$	_____
Entertainment	\$	_____	Mileage	#	_____
Education	\$	_____			

### MISCELLANEOUS

Have you opted out of Social Security? \_\_\_\_\_

If yes, how many quarters were paid into Social Security? \_\_\_\_\_

How many quarters does your spouse have paid in? \_\_\_\_\_

**Please submit a copy of your annual Social Security statement to Beacon Tax.**