

DESIGNATED PARSONAGE ALLOWANCE (DPA) QUESTIONNAIRE

*Provide your anticipated cost for next year

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Number: _____ Email: _____

Date of your Church's December Business Meeting: _____

1. Mortgage Payment/Fair Market Value of Parsonage (a year's rental value)/Rental Payment _____

2. Utility costs paid by you or the Church _____

3. Home Supplies (cleaning, lawn care, general housing needs) _____

4. Repair costs on home, appliances or yard equipment _____

5. Cost of Furniture, appliances or decorator items _____

6. Real Estate Taxes _____

7. Home Insurance Costs _____

8. Home Improvement Expenses _____

9. Down payment anticipated on a new home to be purchased _____

10. Have you exempted from Social Security by filing out form 4361? _____

11. Total Ministry Income _____

(do not include professional expense reimbursements or fringe benefits, but DO include all housing expenses paid by the church)

12. Spouse Income _____

13. Other Business Income _____

14. Social Security or Retirement Income _____

DPA Preparation Fee: \$50 - Fees can be paid by check or credit/debit card

Forms can be returned via mail, fax or email to:

Wellspring Tax Service

1101 Washington Blvd., Unit B

Belpre, Ohio 45714

740.401.0829 (phone)

740.401.1977 (fax)

wellspringtaxservice@gmail.com