



CALIFORNIA-PACIFIC ANNUAL CONFERENCE
of the United Methodist Church
COUNCIL ON FINANCE AND ADMINISTRATION

Church # _____

TABLE 2

Local Church Report to the Annual Conference
Year ending **December 31, 2009**

District Name _____ Church Name: _____

County: _____ Pastor-in-Charge _____

THIS REPORT MUST BE VERIFIED BY THE PASTOR-IN-CHARGE AND SIGNED ON THE BACK PAGE.

- 201. Market Value of church-owned land, buildings and equipment..... (201)_____**
Enter the estimated market value of buildings, parsonages, and equipment plus the value of parsonage-related assets used in the ministry of the church and the support of its pastor(s). If a parsonage is in a charge of more than one church, list parsonage-related assets only on report of church where parsonage is located. If property is held by a multi-church charge in common (rather than by an individual church) a share of the value should be assigned to each church according to its percentage of total professing membership within the charge unless a specific percentage of commonly held property has been otherwise designated. A residence not used as a parsonage should be listed on Line 202. Congregations are not obligated to initiate property appraisals in order to provide this estimate.
- 202. Market Value of all other church-owned assets (202)_____**
Enter the estimated market value of all other real estate and personal property such as cash, stocks, bonds, trusts, securities, investments belonging to the church, including money raised or donated and held for future building programs or any other special purposes, and all property and other investments not included elsewhere.
- 203. Debt Secured by church physical assets (203)_____**
Enter the amount of debt currently held by the church that is secured by church property and assets, such as mortgages.
- 204. Other Debt (204)_____**
Enter the total of all debt currently held by the church that is not secured by church property assets, such as credit cards, lines of credits, and lease-to-purchase agreements. The sum of lines 203 and 204 should equal the total debt currently held by the church.

BENEVOLENCES, CAPITAL EXPENSES, AND HOUSING EXPENSES:

Report benevolences **not** paid through the Conference remittance process. Report all capital expenses. Do **not** include expenses or "shared costs" from a church owned or operated nursery school or day care center except the amount of expenses exceeding income. Do **not** report expenses from other chartered congregations that occupy your facility. Do **not** report expenses paid by grant monies from General Church, Conference, or District program agencies. Round off numbers to the nearest dollar. Report **actual expense** figures only, **not budgeted** or estimated.

- 205. UMW cash sent to District or UMW Conference Treasurer..... (205)_____ .XX**
- 206. Benevolence items not paid to the Conference** but directly to the recipient or to the General Church. (Refugee families and other local or non-U.M. projects)..... (206)_____ .XX
- 207. Principal and interest on debts, loans, mortgages, bonds, etc.** Congregations renting worship and education space should include the rental cost of those facilities.....(207)_____ .XX
- 208. Paid for Major Improvements - new buildings, major repairs or new roof.** (Do not include money you have borrowed.).....(208)_____ .XX
- 209. Paid for Long-Term Equipment - new hymnals, computers, sound/video equipment,** other items used over a period of several years.....(209)_____ .XX
- 210. Housing allowance paid Senior Pastor -list name & amount below then total on line 210.**

SENIOR PASTOR NAME	AMOUNT PAID

Note: Amounts exceeding \$24,000 per pastor are included as expenses for calculation of apportionments.... (210)_____ .XX

211. **Housing allowance for Associate Pastor(s)** - list each name & amount below then total on line 211.

ASSOCIATE PASTOR NAME	AMOUNT PAID

Note: Amounts exceeding \$24,000 per pastor are included as expenses for calculation of apportionment.....(211) _____ .XX

212. **Parsonage(s) insurance, taxes, and maintenance.** (Only if used as a parsonage.)....(212) _____ .XX

213. **TOTAL 205-212**.....(213) _____ .XX

OPERATING EXPENSES:

Lines 214-248 are the basis for 80% of apportionments. Please be accurate and **do not** duplicate figures. Include local church expenses paid from any fund (local church operating or budget fund, special funds, reserve funds, endowment or Foundation funds, etc.).

Report all local church expenses, except money which is directly turned over, such as when a local church collects money for a youth group camp, directly turning it over to the Conference Camping Office. Do **not** report expenses or "shared costs" from a nursery school or day care center which is owned or operated by the church except the amount of expenses exceeding income, if applicable. Do **not** report expenses paid by grant monies from General Church, Conference, or District program agencies. Do **not** report expenses from other chartered congregations which occupy your facilities. Report **ACTUAL** expenses, **not budgeted** or estimated figures. Round off numbers to the nearest dollar.

214. **Christian Education**, supplies, crib room costs, leadership training, program materials, special events, etc.....(214) _____ .XX

215. **Worship and music**, special events, robe maintenance, equipment maintenance, music supplies, etc.....(215) _____ .XX

216. **All program work areas and committees** under the Council on Ministries not listed above.....(216) _____ .XX

217. **Paid for normal maintenance**, light bulbs, maintenance contracts, painting a room, plumbing repairs, custodial supplies and other related costs. Capital improvements are reported on line 209.....(217) _____ .XX

218. **Church taxes** (property, payroll, medicare, social security, etc.)..... (218) _____ .XX

219. **Church utilities** (gas, light, water, phones, etc.)..... (219) _____ .XX

220. **Church secretaries' salaries and benefits**..... (220) _____ .XX

221. **Church custodians' salaries** (including gardeners) and benefits.....(221) _____ .XX

222. **Other lay staff persons**, including Christian Education workers, choir directors, organists, etc. include those employed full or part-time, temporary and regular, salaries and benefits.....(222) _____ .XX

223. **Diaconal minister(s)**, base salary, travel, utilities, housing, and benefits..... (223) _____ .XX

224. **Non-appointed clergy**, base salary, travel, utilities, housing and other benefit, including stipends or honorariums paid to other sources (schools, etc.).....(224) _____ .XX

225. **Finance Committee expenses**, including offering envelopes, bookkeeping materials, reports to givers, finance campaign expenses, auditing, etc.....(225) _____ .XX

226. **Church Office Expenses** not listed elsewhere such as postage and mailing, printing, bulletins, newsletters, supplies, etc.....(226) _____ .XX

227. **Pulpit Supply and other gratuities**..... (227) _____ .XX

228. **Conference lay members' expenses**.....(228)_____ .XX
229. **Advertising and publicity**.....(229)_____ .XX
230. **Insurance premiums**, Workers' Compensation, property, liability, etc.
(Exclude insurance on the parsonage which should be reported on line 212.....(230)_____ .XX
231. **Church share of Pastor's and Associates' CCBC and CRSP DC** pensions paid to the Conference (include local church portion deducted from Equitable Compensation or Congregational Development funds paid by the Conference) (list name & amount below then total on line 231):
- | PASTOR NAME | AMOUNT PAID |
|-------------|-------------|
| | |
| | |
| | |
| | |
| | |
| | |
- (231)_____ .XX
232. **Other unclassified operating** expenses including local church share of pastor(s) moving expenses.....(232)_____ .XX

SENIOR PASTOR-IN-CHARGE (UNDER APPOINTMENT BY THE BISHOP)

233. **Cash salary paid by the local church** (including tax deferred and IRA monies). Do **not** include support contributed by Equitable Compensation, Congregational Development, or general agencies, which should be reported on line 234 (233)_____ .XX
234. **Cash Salary Support contributed by other sources** (Equitable Compensation, Congregational Development, general agency, etc.).....(234)_____ .XX
235. **Vacation pay, bonuses** or other benefits including Pastor's personal portion of pension if paid by local church.....(235)_____ .XX
236. **Accountable Reimbursement** plan actual expense, car allowance, vouchered travel expenses, expense for car provided by the church, and annual conference attendance expense.....(236)_____ .XX
237. **Utilities** (gas, electric, water, phone) paid directly to the utility company or to the pastor.....(237)_____ .XX
238. **Other Expense Allowances** (such as books and periodicals, discretionary fund for personal use, entertainment, meetings, seminars, continuing education, etc.)..... (238)_____ .XX
239. **Health Insurance** (239)_____ .XX
240. **Comprehensive Protection Plan** (CPP) Note: this is Death & Disability Insurance..... (240)_____ .XX

ASSOCIATE PASTOR(S) (UNDER APPOINTMENT BY THE BISHOP)

241. **Cash salary** paid by the local church (including tax deferred and IRA monies). Do **not** include support contributed by Equitable Compensation, Congregational Development, or general agencies, which should be reported on line 242. (list name & amount below then total on line 241):

ASSOCIATE PASTOR NAME	AMOUNT PAID

..... (241)_____ .XX

242. **Salary support** contributed by other sources (Equitable Compensation, Congregational Development, general agency, etc.) (list name & amount below then total on line 242):

ASSOCIATE PASTOR NAME	AMOUNT PAID

..... (242) _____ .XX

243. **Vacation Pay, bonuses** or other benefits including Pastor's personal portion of pension if paid by local church..... (243) _____ .XX

244. **Accountable Reimbursement** plan actual expense, car allowance, vouchered travel expenses, expense for car provided by the church, and annual conference attendance expense.....(244) _____ .XX

245. **Utilities** (gas, electric, water and phone, etc.) paid directly to utility company or to pastor.....(245) _____ .XX

246. **Other Expense** allowances (such as books and periodicals, discretionary fund for personal use, entertainment, meetings, seminars, continuing education, etc.)..... (246) _____ .XX

247. **Health Insurance** (list name & amount below then total on line 247):

ASSOCIATE PASTOR NAME	AMOUNT PAID

..... (247) _____ .XX

248. **Comprehensive Protection Plan (CPP)** Note: this is Death & Disability Insurance (list name & amount below then total on line 248)

ASSOCIATE PASTOR NAME	AMOUNT PAID

..... (248) _____ .XX

249. **TOTAL LINES 214-248**.....(249) _____ .XX

PREPARED BY: _____ DAYTIME PHONE: _____.

NOTE: THIS REPORT MUST BE APPROVED BY THE PASTOR-IN-CHARGE. *2008 Book of Discipline ¶ 340.2.c.(2)(f)*

DATE: _____ SIGNED: _____
Pastor-In-Charge

MAILING INSTRUCTIONS: Please send this **signed** form to the Conference Statistician, P.O. Box 6006, Pasadena, CA 91102-6006. Mail a copy to the District Office. Retain a copy for your church records. This report is due by **MONDAY, FEBRUARY 1, 2010**