

FORM NUMBER 1

To: David Ross
Human Resources Director
Box 12257
Harding University
Searcy, AR 72149

This will certify that I am recognized as a minister of the church of Christ and that I hold the appropriate license or recognition from the state.

In accordance with Revenue ruling 70-549, I hereby apply for a portion of my 2009 salary to be designated as a cash housing allowance by the Board of Harding University. I understand that the value of housing provided or the amount designated by the Board, whichever is the lesser of the two, will be the amount that I may exclude from my 2009 income. The following is anticipated for 2009.

I CHOOSE TO PARTICIPATE IN THE MINISTER'S HOUSING ALLOWANCE PROGRAM FOR 2009.

TOTAL CASH HOUSING ALLOWANCE REQUESTED
(from line 12, Form Number 3) \$ _____

Signature

Date

Please Print Name

I DO NOT CHOOSE TO PARTICIPATE IN THE MINISTER'S HOUSING ALLOWANCE PROGRAM FOR 2009.

Signature

Date

Please Print Name

HARDING UNIVERSITY
Authorization for Payroll Deduction
Calendar Year 2009

This is authorization for the Payroll Office of Harding University to withhold the following amounts on a monthly basis:

Federal Income Tax \$ _____ each month

State Income Tax \$ _____ each month

SS# _____

Signature

Date

Please Print Name

Estimated Minister's Housing Allowance

Date of purchase: _____

FMV of home you own: \$_____

- 1. Rent or principal payments* _____
- 2. Taxes _____
- 3. Interest _____
- 4. Insurance _____
- 5. Repairs & upkeep _____
- 6. Furniture, appliances, etc. _____
- 7. Decorator items _____
- 8. Utilities _____
- 9. Miscellaneous supplies _____
- 10. **Total** _____
- 11. Fair Rental Value computation
 - Compute in year of purchase and in any year of major expense. (Homeowners only)
 - a) FRV of Home (1% of FMV x Number of Months) _____
 - b) FRV of Furniture _____
 - c) Decorator items _____
 - d) Utilities _____
 - e) Miscellaneous _____
 - f) **Total** _____
- 12. Lessor of line 10 or line 11f _____

NOTE: IRS allows the lessor of:

- (1) **Your estimate (can not exceed annual salary)**
- (2) **Fair rental value**
- (3) **Actual expense**

***Payments on home equity loans for cars, boats, etc., can not be included in house payments.**

CERTIFICATE OF ORDINATION

State of _____

County of _____

This is to certify that _____
of _____ is an ordained minister of the church of Christ,
authorized to perform all the services of the ministry.

Signed _____
(Enter name of congregation here.)

Acknowledgment

Subscribed and sworn to or affirmed before me, a notary public in and for the county
of _____, state of _____ on this the
day of _____, 20 _____.

Signed _____
Notary Public

My Commission Expires: _____